"Bureau" Memorandum

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DIVISION FOR HANDICAPPED CHILDREN

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Guest Editor-Samuel Milesky is the program supervisor of schools for the hearing impaired. The seven articles in this issue on the hearing impaired deal with program alternatives, lip reading potentials, training for interpreter-tutors in educational settings with deaf students, and mainstreaming the hearing impaired student. Another article on Public Law 94-142 is also included in this issue.

Guidelines for Authors

The *Bureau Memorandum* invites manuscripts directed to the common interests of special education personnel in schools. Especially welcome is stimulating writing dealing with (1) discussions of current professional and special education related materials; (2) descriptions of new techniques of innovative practices and programs; (3) research reports of interest and significance to readers. Dialogues, poems, and brief descriptions of new practices and programs will also be considered.

Manuscript Preparation

Manuscripts to be considered for publication in any issue of the *Bureau Memorandum* should:

- be submitted in duplicate (original and one clear copy)
- be typewritten (pica style), double spaced. All references, footnotes, and direct quotations should be checked carefully for accuracy.
- be accompanied by a complete identification of all authors. Include title and position, present location, and mailing address of each author.
- if appropriate, include black and white photos that have good light and dark contrast and that are at least 3" x 5."
- manuscripts should average about 1,500 words—approximately six double-spaced typewritten pages.

Manuscript Submission

- send manuscripts to Kenneth McMahon, Editor, *Bureau Memorandum,* Division for Handicapped Children, 126 Langdon Street, Madison, Wisconsin 53702.
- acknowledgement of receipt of a manuscript and notification concerning its disposition will be sent to the main author within 6 weeks of arrival. Additional time will elapse between acceptance of the article and its appearance in print.

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Evaluating Two-Track Programming for Hearing Impaired Children

By William Morehouse
Exceptional Education Program Administrator
Milwaukee Public Schools

Milwaukee's deaf and hard of hearing program began in 1885 and was a completely oral program until 1971. In 1971, some parents requested that their children be given the opportunity to learn and use total communication so that they would not have to send their children to the Wisconsin School for the Deaf in Delavan. These parents were convinced that their children would do better if they were given another form of communication since they had not developed good oral skills and were unable to communicate well with anyone. At the request of these parents, all were surveyed and a pilot program of three classes was initiated.

In 1972, a two-track program was established allowing all parents the opportunity to choose either an oral only approach or a total communication approach for educating their children. At this same time, a planning grant was obtained to initiate a study of the Milwaukee program.

Since 1973, the Milwaukee Public Schools' deaf and hard of hearing program has been conducting a Title III project titled Evaluating Two-Track Programming for Hearing Impaired Children. The purpose is to generate reliable estimates of the deaf child's probability of success in either the oral or the total communication program and to aid parents in their decision regarding placement.

The education estimate is being determined by the New York University Deafness Research and Training Center under the direction of Dr. Jerome Schein, in the form of a statistically significant regression equation. The project did not aim to compare the two educational approaches. Inherent in this project is the belief that there is no one way to educate all deaf children.

The project has used and/or developed a variety of approaches to meet its general goal. These include a slide/tape presentation describing the two-track program, data collection forms for parents and teachers, inservice courses for teachers, parent/teacher education programs, standardized teaching instruments, and two statistically significant regression equations which can be used to predict Milwaukee Public Schools' hearing impaired pupils' achievement in reading on the Stanford Achievement Test for the Hearing Impaired.

Approximately 240 hearing impaired students have actively taken part in the project under the guidance of 40 certified teachers of the deaf, two supervisory teachers, an audiologist, and a project director.

The following items represent the research materials used and/or developed by the project:

- Audiological and Educational Records
- Craig Lipreading Inventory
- Stanford Achievement Test for the Hearing Impaired
- Observations by Research Team
- Family Data Collection Sheet
- Speech Intelligibility Tape
- Parent Rating Forms to rate:
  - ease of communication
  - speaking ability
  - lipreading ability
  - social and emotional adjustment
  - knowledge of deafness

Teacher Rating Forms to rate:

- pupil/teacher interaction
- speaking ability
- lipreading ability
- intellectual ability
- social and emotional adjustment
- social interaction
- ability to teach hearing impaired children

The Deafness Research and Training Center of New York University has provided Milwaukee with two equations which can be used to predict the Milwaukee Public Schools' hearing impaired pupils' achievement in reading on the Stanford Achievement Test for the Hearing Impaired. For

each pupil, information can be computed regarding the probability of success in reading in each track. Parents are provided with information which will indicate the amount of gain the child is expected to make in either track. Predictions are given for each child for both tracks.

Families do have the choice between total communication and an oral only program. However, now that the research project is finished, the educational staff can advise the parents in which track it is predicted the child will have the most success; i.e., if information can be obtained on the characteristics of the child that are needed to utilize the equation. The children do change tracks at the parent's request. The formula for computing predicted reading achievement on the Stanford Achievement Tests for the Hearing Impaired includes computations for the oral track which involve the student's grades, I.Q., lip reading ability, and the teacher's assessment of speech intelligibility. For the total communications track, the formula involves the student's age, the teacher's assessment of speech intelligibility, I. Q., and hearing loss. Equations differ first in the variables which combine to optimally predict Reading Stanford Achievement Test Scores and second, in the relative sizes of weights assigned to the measures within each equation. This formula can be computed by hand after becoming familiarized with the components.

This project received national validation in the fall of 1976, and has been awarded a dissemination grant.

Requests for further information should be sent to the project director.

Special Education Teachers as Case Managers

Special education teachers must develop competencies to become case managers says the University Affiliated Center (UAC) for Developmentally Disabled Children, serving the states of Texas, Oklahoma, Arkansas, Louisiana, and New Mexico. The case manager applies a variety of interdisciplinary findings in developing and managing achievement of specific educational and behavioral objectives. Dr. Donna Keele, Director of the Region VI UAC, which is a client-oriented interdisciplinary training center, applies this concept by managing a program for the development of specific competencies on behalf of special education teachers pursuing graduate degree programs.

The competencies which are desirable for assisting the teachers to achieve a case manager role include the following:

1. Ability to interpret diagnostic profiling and educational programming findings.

2. Possess knowledge of methods and techniques used in educational programming for early intervention.

3. Demonstrate specific levels of knowledge of various frameworks of child development.

4. Ability to conduct formal assessments (standardized measures) and informal assessments (observations and clinical evaluations) of handicapped children, in order to:

    a. Identify children's learning patterns.
    b. Chart learning rates.
    c. Prepare and present data to A/R/D Committees.
    d. Develop intervention strategies based on findings.

5. Possess ability to develop, write, present, and evaluate educational plans in terms of:
    a. Long-range goals.
    b. Short-term objectives.
    c. Strategies (in behavioral terms) to meet stated goals.
    d. Identify resources (materials, media, techniques, and persons) to implement strategies.
    e. List follow-up procedures to evaluate the intervention or educational plan.

Put in very plain words, the UAC program stresses a concept that informed educators and parents alike have long known: It's the *teacher* that makes the difference in working with children . . . and until special educational administrators recognize that fact—and train teachers accordingly—there will continue to be a lot of wheel-spinning.

The training model being applied by the University Affiliated Center is the only one of its type in the nation—and it's specifically designed to work with the severely, profoundly, and multiple handicapped.

Reprinted courtesy of *OutFront in Special Education,* December 1976. OutFront is a monthly consultative service, co-edited by two national-level consultants specializing in the application of humanistic management systems approaches to special education. It analyzes, interprets, and recommends on concerns for exceptional children in the following areas: educational programming, special education renewal, legislative and legal concerns, accountability, management systems, and exemplary programs. A subscription for 12 issues is $36.00. Institutional rates for multiple copies are also available (at a rate less than that incurred by xeroxing copies.) Write to OutFront Information Service, Post Office Box 5767, Richardson, Texas 75080 for information on subscriptions or OutFronts Professional Books Division.

Rural Itinerant Programming for the Hearing Impaired

By John Murray
Teacher of the Hearing Impaired
CESA 4 - Cumberland

Marsha Spees
Teacher of the Hearing Impaired
CESA 14 - Fennimore

The first program in Wisconsin for delivery of itinerant services to the hearing impaired in a rural setting began operation in 1973 through the Cooperative Educational Service Agency (CESA) 4 based in Cumberland. A similar operation was initiated in CESA 14 in Fennimore 2 years later. The authors initiated the task of putting together a puzzle of services trying to make the pieces fit the itinerant structure dictated by the rural setting.

CESA 4 serves 26 school districts in five counties of northwest Wisconsin with a population of approximately 25,000 school-age children. The staff of one soon mushroomed to three teachers of the deaf and five paraprofessionals serving 24 hearing impaired children in its fourth year of operation. Thirty school districts in five counties of southwest Wisconsin having 26,000 students are served by CESA 14 from Fennimore. The hearing impaired program in its second year employs two teachers of the deaf for delivery of service to 17 hearing impaired students. Although neither area has either a day school or a residential school for the deaf within its borders, districts in the two CESA's have a total of 26 hearing impaired students attending classes for the deaf in Superior, Wausau, Eau Claire, Minneapolis, LaCrosse, Madison, and Milwaukee programs, and at the Wisconsin School for the Deaf in Delavan. Even so, the advent of Chapter 115 helped to make it evident that these small rural school districts were not offering adequate services to their hearing impaired population. In each case, the services of a teacher of the hearing impaired were obtained for the purpose of "smoothing the corners" of rough, inadequate programs to make the service puzzle pieces fit the needs of individual hearing impaired students.

In recent years, itinerant programs for the hearing impaired have begun to spring up around Wisconsin. The reason for programs of this type being developed is clear—they serve children who were previously unserved, and others who do not "fit into" the established residential and day school programs for the deaf. As should be expected, the itinerant programs have been molded by the needs of the hearing impaired students they serve.

The Itinerant Population

Upon tackling the task of initiating such a program, it soon becomes evident that three categories of hearing impaired students with exceptional educational needs (EEN) attend regular classes in their local schools and become enrolled in an itinerant program:

— First are those children who have been nearly able to compensate for their hearing loss as it affects their education, as shown by past academic performance. These students apparently do not need a "full" deaf program and often have a mild to moderate hearing loss. This student should be able to handle a regular schedule of classes with support services from a teacher of the deaf and other locally available support personnel such as speech and language clinicians, remedial reading teachers, etc.

— The second category includes a number of students who previously attended a full-time program for the hearing impaired outside of their district of residence but have since returned to their local districts for service. Ideally, the reason for this program change is a demonstration on the student's part that he/she has acquired the essential compensatory skills for participation in a "regular classroom." He/she will, in theory, function in a less restrictive environment as a "mainstreamed" or "integrated" student. In practice, however, these students usually need extensive support services throughout their educational careers.

  This second category may also include a student who returns to his/her local district for reasons other than the above such as a parental job transfer or merely the family's desire to live in the country. This student may exhibit extensive EEN, and will probably demand service from his/her local school district. If the district of residence happens to be small and/or rural, the district designee may discover that an itinerant program for the hearing impaired is the only placement option available which is acceptable to the family. Whether or not such a service model can adequately meet the child's needs, the district is required to provide the service.

— The third class includes local students, the nature of whose handicapping loss suggests placement in a full-time program for the hearing impaired but for one of several reasons remain in their district of residence even though full-time service is unavailable locally. Such reasons include the age of the child and

exercise of the parents option to reject the schools placement recommendation.

(1) Age of the Child - Full, specialized programs for education of the hearing impaired can be effectively instituted by only the larger metropolitan schools due to the low incidence of the handicap. Because of this, hearing impaired students living beyond a 50 mile radius of an existing school program are usually placed in a boarding home during the week for the purpose of attending appropriate classes. No child under the age of 5 will be considered for placement in a boarding home, yet Chapter 115 mandates appropriate service to all handicapped children between the ages of 3 and 21. Furthermore, it is highly recommended that service be initiated as soon as a significant hearing loss has been diagnosed. In the case of a preschool deaf child living beyond 50 miles from the nearest operating program, education must be brought to the child by way of a traveling teacher of the deaf, perhaps in cooperation with an early childhood placement.

On the other end of the age spectrum, and much to our discredit, we find that hearing impaired students in the past decade were not always placed in a program well suited to their needs. Especially in small, rural school districts, these placements were effected due to inadequate evaluation, well meaning but poorly informed professionals, or easy accessibility to a "catch all" special education classroom. Being educated with and as a mentally retarded child over a number of years can cause the child to exhibit educational retardation. It is indeed sad to discover a 17-year-old hearing impaired girl with average or above intelligence who has spent her entire school career in a class for the mentally retarded achieving far below her potential. Equally disheartening is the hearing impaired boy who has been left to his own problems, trying to "make it" in a regular classroom. He has been passed from grade to grade because he had a hearing loss and "he tried."

When we find this older child, the first inclination may be to recommend a full-time placement. However, given some thought, it becomes apparent that 1 or 2 years will not be sufficient to compensate for the years of inappropriate education. Instead of uprooting the child at this late date, it may be more appropriate to enroll him/her in an itinerant program concentrating on life adjustment skills and look forward to encouraging training in a vocation to which he/she is well suited.

(2) Parental Rejection of Recommended Programs - If a district recommends that the child live in a boarding home 5 days a week in order to receive an appropriate special education experience, the parents may reject the placement recommendation as is their legal right in any case. Consequently, no door is left open except enrollment in regular classes at the local level and, hopefully, participation in an itinerant program for the hearing impaired. Parents make the final decision regarding their child's educational program so the district of residence may find itself with an itinerant program as the only option left.

A caseload for an itinerant teacher of the deaf is comprised of students from these three categories for better or for worse. As teachers, we have a professional responsibility to our students, parents, and schools. Therefore, we must not mislead ourselves and our fellow teachers into thinking that more than a handful of students with significant hearing losses can succeed in a mainstreamed situation, unless that concept includes rather extensive support. An EEN for a hearing impaired student seldom disappears and therefore integration in regular classes cannot be looked upon as an ultimate goal. By being forced to serve students in the mainstream, the difficulties evidenced in the itinerant delivery system may be erroding the "golden" concept of mainstreaming itself.

After working daily with the child and maintaining close contact with the parents, the itinerant teacher of the hearing impaired is often in a better position to advise parents about their child's specific needs and abilities. As the child continues to attend regular classes, it may become more apparent that the hearing impaired child is not being afforded maximum opportunities for success. Through continued communication between home and school, the teacher of the deaf may convince the parents that enrollment in a full-time program would be in the best interest of their child. This bond of mutual respect and understanding has been one of the most positive aspects of parent contact evolving from an itinerant program structure.

Special Programming, Itinerant Style

When determining the size of a caseload for a rural itinerant program, the key word to remember is rural. When considering the combined hindrance of rough expansive terrain and low incidence, it soon becomes clear that serving from eight to twelve students is a full-time job.

Considering the varied population enrolled, it becomes obvious that teacher time is critical. Each child, because of age and nature of handicap, is considered separately, but for all students the itinerant teacher needs to become case manager in addition to the other hats he/she wears. The term case manager as used here does *not* mean merely selecting classes and remaining a background figure. For a rural itinerant teacher, it means many things including responsibility for determining instructional priorities, de-

sign of course modification, direct delivery of critical instruction, in-service of regular teachers, management of tutors and paraprofessionals, and counseling of parents and students.

Before long, a conscientious teacher will realize that many (if not all) of his/her students need a 5 day support service. Whatever the age, the itinerant teacher can expect to have students who need more of his/her time than is built in a day. Delivery of this is often possible only through a cooperative effort between speech clinicians and special teachers, along with a wise use of tutors and paraprofessionals. CESA 4 is currently investigating the effectiveness of using paraprofessionals to help support low-incidence rural itinerant programs through a Title VI-B federal grant. Examination and experimentation with unique delivery models is especially necessary in these programs. Flexibility of service offerings is a must - the very foundation the itinerant program is built on. This is evident through trying to serve many students. Frequently the time spent driving and the cost of that time spent on the road takes its toll. Hands, in addition to those of the itinerant teacher, are needed to make the service effective.

A full and fair description of the variety of delivery models and a discussion of how the types of instruction and support service have evolved is not possible in this short article. A more complete treatment of itinerant programming for the hearing impaired is being prepared by the authors for publication at a later date.

Direct Service Delivery Options—It would be most effective and efficient to find clusters of students or to bring several children together for group instruction but this is seldom possible. One option for very young hearing impaired children is the local early childhood program. If the early childhood class can be adapted to meet the needs of a deaf child (and that's a big "if"), valuable service is available and should be considered as one facet of the child's program. In CESA 14, the parents of preschoolers and their hearing impaired youngsters are eligible for enrollment in a home training program replicating the Portage Project model. These weekly contacts help parents to develop their own skill in teaching their child and encourage continued contact with the John Tracy Clinic program. This has proved to be very valuable in cooperation with regular home therapy sessions with the itinerant teacher of the deaf. In CESA 4, three hearing impaired preschoolers are enrolled in a class operated by a teacher of the deaf.

For school-age children, it appears there are four instructional alternatives open to the traveling teacher: substitution, reinforcement, supplementation, or modification of regular classroom offerings. This is necessary because quite often the regular class our student attends is not entirely appropriate. If a necessary or required subject is (as taught in the regular classroom) totally inappropriate and unamendable to our student's needs, the class requires a suitable substitute. This alternative is the most restrictive since it requires extensive staff time (perhaps a cooperative effort), materials, and room. The second option is the common practice of reinforcement, that is, finding out what topics are being taught by the regular education teacher and going over with the hearing impaired student the areas he/she is weak in-much as a tutor would do. Supplementing is adding some special materials or assignments to the student's existing requirements that are designed to remediate or develop weak areas, such as vocabulary. This particular option may afford a hearing impaired student the extra help he/she needs to compete or it may increase the burden on an already frustrated student. Such individual differences must always be taken into consideration. Finally, modification of existing classes by the regular teacher with assistance from the itinerant teacher may be possible. In practice, the final programming effort may very likely be some combination of the four options described above.

The children are "there" and some do not "fit in" existing program models. For these reasons, the effective itinerant program requires its teachers to be independent, yet cooperative and resourceful; efficient, yet flexible; well-trained and energetic, yet patient. Given additional support from administrators, supervisors, boards of education, the community of professionals, and parents, the itinerant teacher can institute an effective program for hearing impaired students at the local level. This position by nature is poorly defined, difficult, and challenging yet highly rewarding since it can make a difference in a hearing impaired student's education and life.

CEC Announces Replication of Early Childhood Education Institutes

This past February, Phoenix was the site for the initial presentation of CEC's institute series on Early Childhood Education. Due to the overwhelming response, CEC plans to repeat these 19 institutes in New York, August 11-12, 1977.

As the new federal legislation PL 94-142 now mandates appropriate individualized educational opportunities for all children beginning at age 3, these institutes are designed to assist the educator, both administrator and practitioner, as well as teacher trainer, at the early childhood level in various aspects of curriculum planning, in location, screening, and identification of young children, and in the implications of drug therapy.

Attendance is open to all interested persons, non-CEC members as well as CEC members. Attendance is by preregistration only, $45.00 per institute for CEC members; $60.00 per institute for non-CEC members. Preregistration deadline is July 15, 1977. For further information, write the CEC Convention Unit, 1920 Association Drive, Reston, Virginia 22091, or call toll free 800-336-3728.

Wisconsin-Milesky Test of Lip Reading Potential—

A Composite of Subtest Scores

By Samuel D. Milesky
Supervisor of Schools for the Hearing Impaired
Division for Handicapped Children

Much has been written regarding modes of communication, methods of teaching, and the changing approaches to deaf education. However, in the desire to fit hearing impaired youngsters into a hearing world, the important factor of innate capability to learn through certain accepted sensory channels has been neglected. Is it realistic to assume that all persons learn equally well through eyes and ears? That if one sense is impaired, the other automatically becomes strengthened?

In our headlong rush to assure the deaf that they will be able to function as equals in a hearing world, we have stopped short of trying to ascertain just how a hearing loss could affect a person's general learning capacity and what substitute measures may have to be adopted to enhance learning. In order to offer a rational approach, it would seem more logical to determine whether a child with a hearing loss does have certain capabilities or talents, if you will, and maximize these in the learning process.

In this regard, Professor Jacob Kwalwasser (1955) in his book, *Exploring the Musical Minds,* noted,

> "Not everyone, obviously has the required equipment to become a musician. To achieve success, indispensable requirements in motor, sensory, emotional, intellectual, and aesthetic capacities are needed. Between the categories of 'good' and 'poor', musically vast measurable innate differences are found. No matter how expert the teaching, talent cannot be bestowed upon the learner. Sterling instruction, favorable environment, industry, interest, and intensity of drive are all valuable assets as far as they go, but they are not substitutes for talent."

If we substitute "lip reading ability" for "talent," the above paragraph sums up the task confronting us in the education of deaf children.

In 1957, this author felt that an examination of the elements involved in lip reading could lead to a prediction of success in such a vital area. Accordingly, a battery of tests was compiled which, it was felt, indexed these elements and which could be translated into a mental age considered an indicator of individual capability. The object was to arrange the test results in relation to a general base line on a profile graph. In this way, a study of the individual subtest results could be viewed in relation not only to the mental age, but in relation to the other subtests for significant interrelationships.

The initial testing in 1958 and 1959 was done by school psychologists in various school districts in Wisconsin operating classes for the deaf. The results at that time were sufficiently encouraging to sustain the concept over the years since the report was published in the *Volta Review* (Milesky, 1960).

In general, it had been assumed, for purposes of isolating some factors in lip reading, that people may be categorized roughly as having or not having the following characteristics to some degree:

Analytical ability.
Synthetic ability.
Visual orientation.
Auditory orientation.
Adaptability to changing conditions.
Outgoing personality.

Involved also in lip reading, is the level of language and vocabulary development and the situations in which this skill is utilized. A most important factor within an individual is his/her motivation or self-sustaining drive for accomplishment. To this may be added family support and encouragement. These latter elements are difficult to determine in test settings.

However, a drawback in the conclusiveness of the original study was a minimal control of administration in that each tester had his or her own technique. This drawback has been eliminated in a later study. One school psychologist has administered all the tests personally and so has given stability in this aspect which in turn lends itself to improved credibility in the results.

In the latest study, the test battery used in the original study has been altered in that different subtests were used which accomplished the original purpose. Assuming that lip reading potential is present in all persons to differing degrees, it was further assumed that the basic elements are possible to evaluate. Such elements have been chosen, which, in the author's opinion, are most common in all good lip readers. They also are testable with currently available tests and are described in this article.

The intent of a second study was to replicate the original battery, the elements of which are based on the above assumptions with respect to its adequacy as a predictor of lip reading ability in young hearing impaired children. It is the expectation that teachers will look at children in light of these limitations on the one hand and potentials on the other and so be guided by practical considerations. Results were extremely gratifying.

This test battery has been used since to assist local operating districts in evaluating their current positions in the education of the deaf. Individual cases also have been evaluated and results were used to improve programming or as a basis for scheduling a two-track system.

The findings, although exciting and promising, must be interpreted for each child as a total entity. Either/or situations are rare. Children will fall into three general classes such as high potential for lip reading, low potential for lip reading, and average potential for lip reading.

It is repeated for emphasis that this battery is to assist those working with hearing impaired children to understand capabilities. No facet of deaf education is to be negated in favor of another. It is merely to realize that children tend to learn in the manner which is most efficient for them and if this input system is damaged, it poses great problems. If the most efficient input system is not damaged, then the child can compensate for the damage to a greater degree.

It is well for all concerned to recognize limits and in a psychological sense, not to expect youngsters to perform beyond. It is well, however, in light of results, to hold children to their potential. This then, gives to the teacher and to the family, better understanding of a child with a hearing loss. What is done with the information, of course, depends on the conscience of all.

The Wisconsin—Milesky Battery

The test battery used to examine the factors previously noted can be readily assembled, results equated to mental age (MA), and the results then placed on a graph to present a profile easily interpreted. A description follows of the Wisconsin-Milesky Battery:

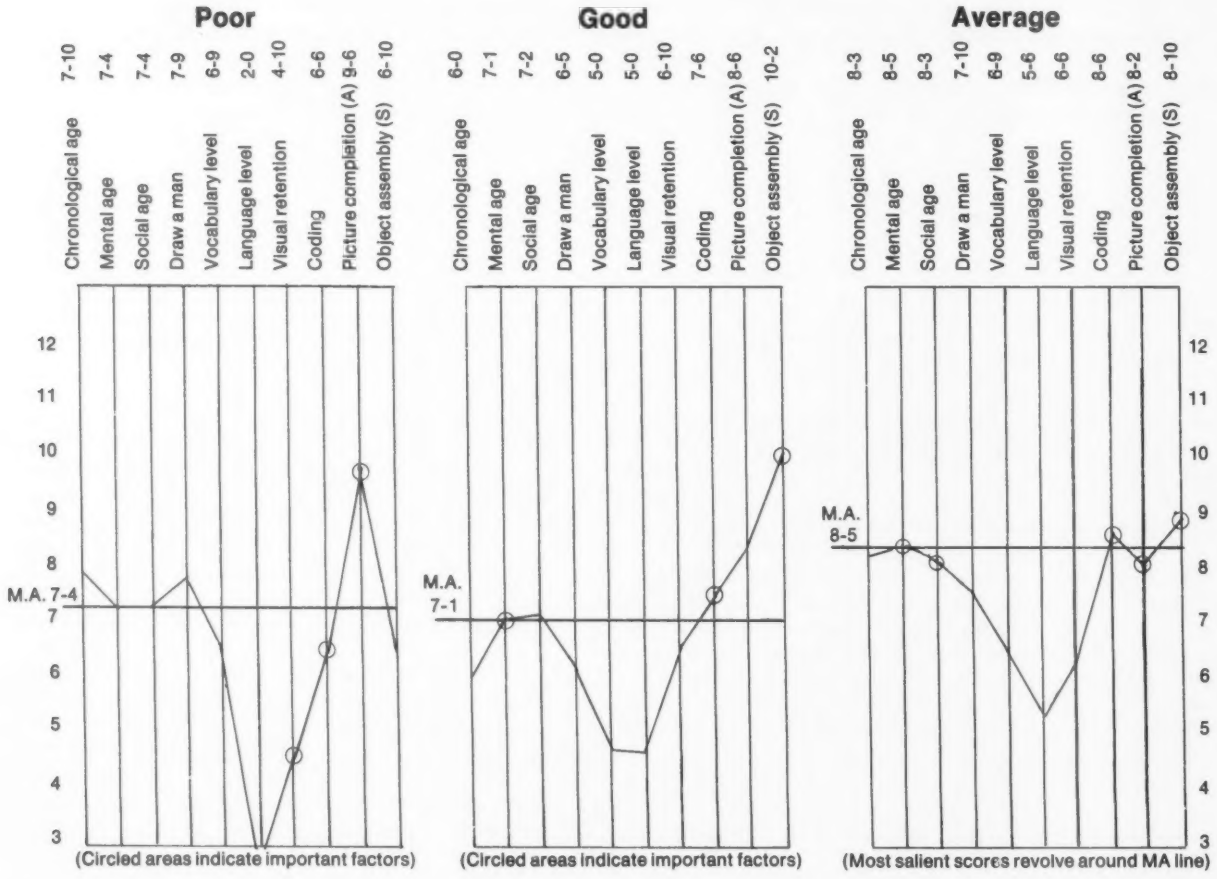
— The Wechsler Intelligence Scale for Children (WISC) or the Nebraska-Hiskey Test of Learning Aptitude can be used to obtain a general picture of intelligence and to establish a mental age base line;

— Coding (WISC-subtest) indicates ability to change with fleeting stimuli;

— Vineland Social Maturity Scale to ascertain social functioning;

— Goodenough-Harris Draw-A-Man Test is a measurement of self-perception and adjustment to others;

Lip Reading Potential Profiles



— Vocabulary and Language Level obtained from teachers as a benchmark for academic level. A more standardized basis must be developed for uniformity yet individually the teachers became more aware of the level of competance revealed by each child;

— Benton's Visual Retention Test or the Visual Sequential Memory Test of the Illinois Test of Psycholinguistic Abilities can be used to obtain the speed with which a youngster can recall visual figures;

— Picture Completion (WISC-subtest) reveals ability to analyze or see small segments; and

— Object Assembly (WISC-subtest) a means of showing ability to see in a global or synthetic manner.

With teacher input and practice, profiles can be interpreted and utilized with 75-85% accuracy in predicting lip reading potential. Results can also be valuable due to increased understanding of a child's mode of learning. With added information, individual educational plans (IEP) can be suggested more in keeping with a hearing impaired youngster's needs.

Briefly stated, good results in personal integration (Draw-A-Man) visual retention, coding, and object assembly will indicate good potential for lip reading, that is, if these scores tend to be close to the MA line.

Acknowledgement to Gladys W. Ihde, school psychologist, Oshkosh, retired, for her replication and John J. Cook, Ph.D., research coordinator for the Division for Handicapped Children, for his statistical analysis is gratefully made at this point.

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History of Total Communication in Oshkosh

By Dave Schallhorn
Teacher of the Deaf
Oshkosh Public Schools

Total communication (TC) was initially used in Oshkosh in 1971 with a class of multiply-handicapped deaf children. During the 1972-73 school year, a federal project dealing with total communication was initiated in Oshkosh. The purpose of this project was to implement total communication in the entire hearing impaired department of the Oshkosh day school. It provided inservice training to teachers and aides to improve and coordinate their skills in sign language. It also provided training to parents and volunteers.

One class was labeled the total communication classroom in which all means of communication were used. Simultaneously, a classroom was established that used the oral approach. This oral class was integrated with hearing children each year. Although the classroom approaches remained different, the children were not restricted from interacting with each other.

Purpose of Project

Since Oshkosh had implemented the use of total communication, it was necessary to evaluate the effect it was having on our program. We felt a classroom that mainstreamed deaf children of various backgrounds and hearing children would be a beneficial placement for all children, both educationally and socially. Therefore we applied for and received a federal grant to use 1 full year to prove this theory.

The purpose of the project was to show that (1) a class of deaf children with an oral, integrated background can work successfully with a deaf class with a total communication background without deterioration of any total communication skills, specifically: speech, lipreading, and auditory training and (2) that deaf children who rely on any or all aspects of total communication can successfully integrate with a hearing class for specific subjects with the assistance of an interpreter-aide and follow-up from their special education teacher.

Basic Operation Plan

Two project teachers who were certified teachers of the deaf, one project teacher who was a certified elementary

Figure 1 - This graph indicates that children with a total communication background improved their speech with an integrated system.

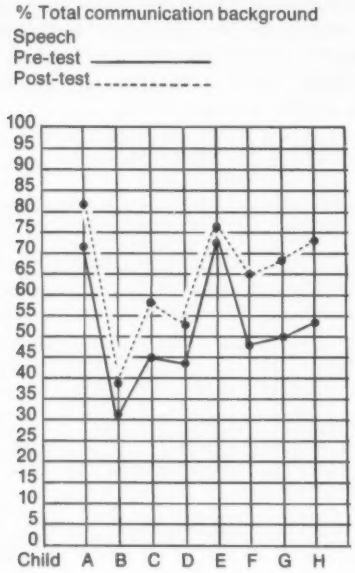
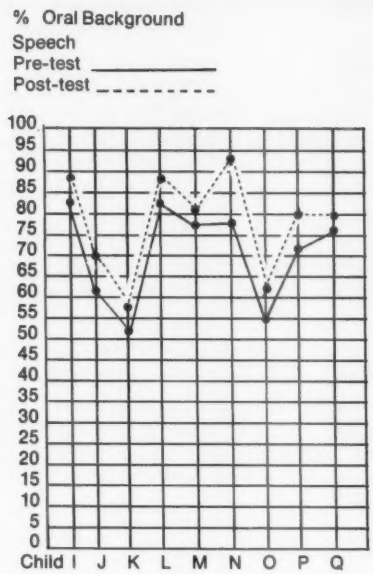


Figure 2 - This graph indicates that children with an oral background also improved their speech with an integrated system.



teacher, and one interpreter-aide were hired for the duration of the project. Two deaf classes providing a total of 17 hearing impaired children were included in the project. One hearing class of 12 fourth graders and six learning disabled children provided the class for mainstreaming.

The activities that were involved during the year included: (1) orientation of entire staff and parents; (2) designing tests or incorporating present testing instruments for all total communication areas; (3) full integration of both deaf groups with each other; (4) partial integration of the deaf children with the hearing group; (5) pre-tests, periodic evaluation, and post-tests in each of the areas of communication; (6) video-taping segments of class work; and (7) analyzing data and evaluating the curriculum for successes or failures of the mainstreamed classroom.

Results of Communication Tests

The following results were achieved in the four areas of communication:

— The pre-test and post-test for speech showed that all the children in both the oral and total communication classes improved to some degree.

— The pre-test and post-test scores for lipreading showed that one child in the total communication

Table 1 - Communication test results.

	Total Communication		Oral		Combination	
Speech	Pre-test/Post-test	64%	74%	79%	85%	72%	80%
Vowels and consonants							
	Increase or decrease	+10%		+6%		+12%	
Speech	Pre-test/Post-test	52%	65%	71%	78%	62%	71%
Total							
	Increase or decrease	+13%		+7%		+9%	
Lipreading	Pre-test/Post-test	29%	41%	61%	68%	46%	55%
	Increase or decrease	+12%		++7%		+9%	
Signs - Receptive	Pre/Post	58%	83%	51%	87%	54%	85%
	Increase or decrease	+25%		+36%		+31%	
Signs - Expressive	Pre/Post	41%	68%	40%	74%	40%	72%
	Increase or decrease	+27%		+34%		+32%	
Auditory Training	Pre/Post	60%	64%	71%	77%	66%	71%
	Increase or decrease	+4%		+6%		+5%	

Table 2 - Speech results for individual children.

	Vowels		Consonants		Total Vowels and consonants		Blends		Total	
Michelle	100%	100%	82%	90%	88%	93%	75%	75%	84%	88%
Rich	86%	81%	71%	71%	75%	75%	30%	57%	62%	70%
Jon	89%	93%	44%	49%	58%	64%	38%	44%	53%	58%
Karen	98%	95%	86%	89%	89%	91%	71%	78%	84%	87%
Monique	98%	95%	89%	92%	92%	93%	44%	55%	78%	82%
Darlene	98%	97%	81%	95%	86%	96%	59%	86%	79%	93%
Kathryn	75%	86%	67%	74%	69%	78%	19%	25%	55%	62%
Trish	93%	100%	65%	81%	74%	87%	63%	63%	71%	80%
Dennis	93%	97%	75%	85%	81%	89%	65%	55%	76%	80%
Shari	93%	97%	75%	85%	81%	89%	51%	65%	72%	82%
Kris	41%	59%	42%	45%	41%	50%	5%	13%	31%	39%
Mike	95%	90%	47%	65%	63%	74%	1%	21%	45%	59%
Vicki	68%	79%	50%	49%	56%	59%	15%	36%	44%	53%
Jane	89%	84%	72%	84%	77%	84%	65%	59%	74%	77%
Jim O	82%	90%	58%	67%	65%	75%	3%	40%	48%	65%
Jim R	80%	88%	60%	72%	66%	78%	11%	44%	50%	68%
Mark	75%	93%	59%	72%	63%	79%	32%	57%	54%	73%

class went down 5%. The other six all increased in lipreading skills. In the oral class, two children scored less on the post-test. The other six all increased in lipreading skills.

— The pre-test and post-test for auditory training revealed that two children from the total communication class decreased slightly in the post-test score. The other six children improved noticeably. In the oral class, one child had the same score for the pre-test and post-test. All other children in the oral class showed an improved score for the post-test.

— The most noticeable improvements were in the tests for sign language - both receptive and expressive. All 17 children showed improvement in these two areas. The children from the oral class made greater gains. This could have been anticipated since they began the year with fewer signs.

— As the specific figures on the charts below reveal, there was an improvement for each child in each area of communication with a few exceptions. For the 85 communication tests given, three results remained the same and five tests showed a decrease in score from pre-test to post-test. These five tests were all a decrease below 10%. The project staff feel this minimal difference does not show any loss in communication skills by any of the children. It does show an overall improvement for the entire communication tests of 90.5%. These figures and the following graphs certainly show the three-way mainstreaming approach was educationally beneficial for all hearing impaired children that were involved.

Results of Social Benefits

The results in the academic areas were fairly easy to show increase or decrease between September and May. The project staff also felt the year was very beneficial socially for all children involved.

Some of the hearing impaired children had conflicts dealing with their handicap in relationship to the hearing children. This emotional adjustment of accepting themselves as hearing impaired may have come sooner for our classes because of the mainstreaming classroom. However, it is an adjustment most of them would face eventually during their school years.

We received comments from parents of children who felt

Table 3 - Achievement tests results.

Total Communications			Oral		Total	
Vocabulary	Pre/Post	1.0	1.0	1.5	1.6	1.2	1.3
	Increase or decrease	0		+.1		+.1	
Reading	Pre/Post	2.5	2.6	3.2	3.2	2.9	2.9
	Increase or decrease	+.1		0		0	
Math Concepts	Pre/Post	1.9	2.0	2.4	2.3	1.9	2.2
	Increase or decrease	+.1		— .1		+.3	
Math Concepts and Application	Pre/Post	2.1	2.1	2.0	2.6	2.0	2.4
	Increase or decrease	0		+.6		+.4	
Listening Comprehension	Pre/Post	.4	1.1	1.2	1.8	.9	1.5
	Increase or decrease	+ .7		+.6		+.6	
Grade Equivalent	Pre/Post	1.8	1.8	2.1	2.3	1.8	2.0
	Increase or decrease	0		+.2		+.2	

concern over these psychological problems their children faced. Some of the comments were: (1) the present classroom has "provided a few rocky moments but (he) is growing in self confidence. He has been forced to admit his deafness, recognize limitations. We believe the end result is very positive"; (2) The present classroom has affected my child because she "has gained much greater confidence in away-from-home contacts with hearing people"; (3) The present classroom "has helped her immeasurably. It has helped her to get along with all sorts of people - non-hearing and hearing"; (4) The present classroom "at first had a bad effect. It seemed to emphasize his limitations. He was not happy being a deaf person - a truth he'd have to face sometime. Now he seems much more confident and concentrates on abilities instead"; (5) The present classroom has made my child "more independent and not so afraid to communicate with more hearing people"; (6) My child has become "more at ease with hearing and deaf children"; and (7) "The present combination has removed the barrier of hearing and deaf as the class thinks of itself as one class . . .This in itself is a large plus." These comments are from parents of both groups. The parents of the oral and total communication children felt the three-way mainstreaming was beneficial for the emotional and social development of their children.

There was also concern for each child's self-concept. It was important the children had strong self-images of themselves as deaf children and did not lose their identity in the larger classroom placement. While this is an age for the children to have some identity problems, the project staff felt the classroom situation was beneficial for the majority of children in each group. A curriculum in self-concept was worked on during the school year. We tried through our classroom to develop a strong image as a deaf person, without the stigma of being an oral or signing deaf person. There are no statistical data on this but we did get feedback from parents: (1) "I think (the present classroom) has raised her self-image"; (2) My daughter "accepts her deafness well, (has a) better self concept and a more out-going personality"; (3) The present classroom "has enabled (my child) to adjust to his impairment and find he is capable of communicating with the hearing world"; and (4) The present classroom has made him realize that "he can compete with hearing peers in many ways. Thus he can accept his deafness far better than if he were not with hearing children."

One set of parents felt their child "gets far less discouraged" now. The present class has seen where it fits in with other types of deaf children as well as with their hearing peers.

One-third of the parents whose children were enrolled in the oral class stated they now felt the total communication approach a necessity for their child. They would not accept the strictly oral approach again.

While the comments of the parents provide more insight about their reactions, the basic results of the questionnaire sent home provide the statistics on their overall positive reaction to the three-way mainstreaming situation.

Parent Questionnaire

May 1976

1. Overall reaction to your child's enrollment in a program using total communication.

	Total communication class	Oral class	Average
Necessary	88%	44%	64%
Advantageous	0%	33%	18%
Necessary and advantageous	12%	22%	18%
Somewhat beneficial	0%	0%	0%
Of no benefit or detrimental	0%	0%	0%
Somewhat detrimental	0%	0%	0%
Detrimental	0%	0%	0%

2. Overall reaction to your child's placement in a total communication class existing within a school that employs total communication.

Desirable	100%	89%	94%
Indifferent	0%	11%	6%
Not desirable	0%	0%	0%

3. Overall reaction to your child, with an oral background, changing to a total communication approach.

Desirable	75%	100%	88%
Indifferent	0%	0%	0%
Not desirable	0%	0%	0%
No answer	12.5%	0%	6%
	12.5%	0%	6%

4. Overall reaction to your child's placement in a classroom utilizing the oral approach within a school that employs total communication.

Desirable	62.5%	89%	76%
Indifferent	0%	0%	0%
Not desirable	37.5%	11%	24%

5. Overall reaction to your child mainstreaming for various subjects with hearing children.

Desirable	100%	100%	100%
Indifferent	0%	0%	0%
Not desirable	0%	0%	0%

6. Overall reaction to your child mainstreaming for academic subjects when possible.

Desirable	100%	89%	94%
Indifferent	0%	0%	0%
Not desirable	0%	0%	0%
No answer	0%	11%	6%

7. Overall reaction to your child mainstreaming for "specialist" subjects (i.e. Phy. Ed., Music, Art)

Desirable	100%	89%	94%
Indifferent	0%	0%	0%
Not desirable	0%	0%	0%
No answer	0%	11%	6%

8. Overall reaction to your child mainstreaming independently (placed in a hearing class with no member of the deaf department present.).

Desirable	12.5%	56%	35%
Indifferent	0%	11%	6%
Not desirable	87.5%	33%	59%

9. Overall reaction of your child mainstreaming with assistance (presence of teacher of the deaf or interpreter aide).

Desirable	75%	100%	88%
Indifferent	12.5%	0%	6%
Not desirable	12.5%	0%	6%

	TC	Oral	Average
10. Overall reaction to your child's placement in a classroom with two deaf teachers team teaching.			
Desirable	62.5%	78%	70%
Indifferent	25%	0%	12%
Not desirable	0%	22%	12%
No answer	12.5%	0%	6%
11. The present situation aids my child to become more independent.			
Yes	75%	100%	88%
No	0%	0%	0%
No visible change	25%	0%	12%
12. The present classroom aids my child's self concept.			
Yes	87.5%	89%	88%
No	0%	0%	0%
No change	0%	11%	6%
No answer	12.5%	0%	6%
13. I feel the present classroom situation has affected my child in the following ways academically: (i.e. positively or negatively).			
Positive reply	75%	100%	88%
Negative reply		0%	0%
Neutral reply		0%	0%
Stayed the same	12.5%	0%	6%
No answer	12.5%	0%	6%
14. I feel the present classroom situation has affected my child in the following ways socially:			
Positive	87.5%	89%	88%
Negative	0%	0%	0%
Neutral	0%	11%	6%
No answer	12.5%	0%	6%
Same	0%	0%	0%
15. I feel the present classroom has affected my child's image of himself as a hearing impaired person in the following ways:			
Positive	87.5%	89%	88%
Negative	0%	0%	0%
Neutral	0%	11%	6%
No answer	12.5%	0%	6%
Same	0%	0%	0%

Council Urges Schools to take on Severely Handicapped

It's time to take responsibility for educating the severely handicapped away from institutions and turn it over to the public schools, says the Washington-based Council for Exceptional Children (CEC). New federal legislation mandates education for all handicapped youngsters, and educators now have access to programs for the severely handicapped that have proved effective in developing motor, language, and cognitive skills as well as academic and social competence, CEC says.

Why the Schools? CEC offers a number of arguments for the transfer, including that school is the one public agency normally responsible for helping the family induct the child into society. In addition, CEC points out that schools already have responsibility for providing educational services to the majority of exceptional children; the services need only be extended to include the severely handicapped.

CEC also notes that schools are geographically dispersed and serve total populations by geographical area, an essential requirement for a comprehensive service program for severely handicapped students. Moreover, school buildings are seldom used to capacity, particularly with declining enrollments, and using schools to house comprehensive services for handicapped students would mean savings in capital expenditures. Also, schools have a tax base in states and local communities, and the full array of services required by severely handicapped youngsters should not be dependent entirely on federal or private sector funding.

Finally, CEC reasons that once the special disabilities of exceptional children are attended to, their problems are predominantly educational.

Institutions Inappropriate. Pointing to the years of documented failure in public and private institutions, CEC concludes that institutional placement for severely handicapped children can never be appropriate. Even the most frequently heard arguments for placement are unacceptable—absence of family and foster care to support the child, the marriage or siblings are suffering because of the child's presence, a variety of specialists are needed and must be centralized in one place to serve a wide geographic area or the child requires round-the-clock comprehensive management. CEC says if it is not possible for a particular child to live at home, alternative living situations might be semi-independent group homes, foster or adoptive parent situations, or, if necessary, local hospitals.

Write CEC, 1920 Association Drive, Reston, VA 22091 (Cat. No. 76-41565) for copies of the report, "Hey Don't Forget About Me!": Education's Investment in the Severely, Profoundly, and Multiply Handicapped.

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The Pros and Cons of an Integrated Setting

All parents look forward to providing their children with many of the opportunities and joys of childhood which they recall. It is against this backdrop of our own experiences that we enter parenthood with a sense of understanding and confidence. It is natural that we recall these positive experiences and wish to provide similar ones for our children.

Discovering that a child is deaf, however, causes parents to wonder whether or not they truly can provide these experiences and, if they do, whether they will have a similar positive meaning to the child. This may cause parents to feel somewhat helpless and to lose confidence in their own ability to support the normal development of their deaf child. It also results in a tendancy for parents to insist on having the deaf child placed in an environment that most closely resembles the one they knew, even if this environment is not really relevant or appropriate to the child with a severe hearing impairment.

To integrate deaf children in public school programs is a goal which has always been shared by parents and professionals. Integration is a legitimate and worthy consideration provided it places the child in a learning environment where he can grow academically and emotionally. However, parents must resist placing a deaf child in a public school for reasons which are important to them but not related to the child's well-being. They want to say, "Yes, Johnny is deaf, but you see he goes to a regular school like other children." Thus, there is a strong temptation to simulate normalcy, to provide experiences similar to their own, and to avoid facing the severe learning problems imposed by deafness. Parents may respond to these feelings by placing the child in a public school program, blindly assuming that this is the best program for him/her. It can be, but let's look at the pros and cons of an integrated setting.

What is meant by an integrated setting for a deaf child?

As the word "integrate" means to unite or to form into a whole, we must assume that an integrated setting is one in which a deaf or severely hearing-impaired child is placed with and among hearing children for the purposes of instruction in a school. We make three major assumptions when we consider placing a deaf child in an integrated school setting. We assume first, that as the deaf child will live in a hearing society, he/she will learn best in a school program with and among hearing children. Second, we assume that the loss of a primary receptive sense, hearing, either can be substituted by vision or is not essential in a setting in which a high percentage of interaction is oral/aural. Third, we assume that the teacher, generally without a special understanding of deafness, can overcome the barrier imposed by a hearing loss so that instruction will be meaningful to the child.

Placing deaf children physically among hearing children is the least important dimension of integration. Integration implies proximity. It also implies that the purpose of instruction can be equally well served. So when we talk about integrating deaf children with hearing children in a public school, we are saying that the deaf children in classrooms with hearing children will experience equal educational opportunities in this environment. We are also saying that this environment is as good as, or better than, a special environment in which learning problems resulting from deafness will be dealt with specifically.

Don't hearing-impaired children feel more "normal" in an integrated classroom situation?

Not necessarily. They will know, of course, that they are going to a public school like other children. On the other hand, they may suffer experiences in a public school which emphasize their disability and constantly remind them of it. If hearing children tease them or react negatively, if the teacher does not understand deafness and requires tasks which they cannot do well, or if they fall behind the class academically, they will inevitably be reminded of their hearing impairment in ways they will never forget.

Are there conditions under which the integration of deaf children in a public school will work well?

Yes. When the full implications of a child's disability are taken into account and adequate provisions made to cope with them, hearing-impaired children can succeed in an integrated setting. It is the purpose of this handbook to alert parents to the special provisions which are required in order for deaf children to succeed in a public school program. The requirements, however, are substantive. As indicated in preceding chapters, they involve special education on the part of the teacher, curriculum considerations, the use of visual media and materials, other supporting services, and more individualized instruction.

Is it not important for a deaf child to be able to remain with his/her family as he/she goes to school?

Yes. This is one of the major advantages of a deaf child's entering a public school in his neighborhood or community. The family environment provides tremendous reinforcement and assistance. He/she may also experience a normal family life, especially the daily expression of the love of his/her parents and his/her brothers and sisters. We must remember, however, that some deaf children live in

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environments which are far from ideal—which are indeed very negative influences due to parents who cannot accept a child's deafness, parents who are unfit for parenthood in any case, homes where there is poverty or ignorance, or homes where there is severe disagreement, even antagonism, between and among members of the family. The point here is that unless life with the family constitutes a reinforcing, positive atmosphere for the deaf child, the desirability of a child's living at home and attending a public school program is significantly reduced.

Can students be "partly" integrated in a public school program?

Yes. Various patterns exist for integrating deaf students in public schools. In some of the best arrangements, hearing-impaired children are put in special classes with well-prepared teachers and are "integrated" into such classes as physical education and art. This plan shows sensitivity to the basic educational needs of deaf children and at the same time enables them to associate with hearing children under circumstances which permit them to understand and enjoy these experiences.

Isn't teaching deaf children in an integrated public school class cheaper?

The cost of educating deaf children in a public school setting is cheaper only if no special provisions are made to accommodate their deafness. In other words, if deaf children are put in large classes without a special teacher, without tutorial assistance, without supporting services, and without the use of specialized instructional technology, instruction is cheaper. To the extent that the public school provides a specialized learning environment for deaf children, the cost of instruction rises until no financial advantage is realized.

How can I know whether or not my hearing-impaired child should attend a public school?

The following criteria provide an objective approach to the integration of deaf children in a public school. If the questions can be answered positively, the child may respond well in an integrated setting.

1. Does the pupil use the receptive and expressive skills of communication (speechreading, speech, language, reading, and writing) well enough to function successfully in a regular class program?
2. Are the pupil's social and emotional maturity levels average or above the average of hearing pupils in the regular class?
3. Can the pupil direct his/her attention to the assigned work and follow the directions given for doing the work?
4. Is the regular class enrollment small enough so that the teacher will have an opportunity to devote some of his/her time to helping the deaf or severely hard-of-hearing pupil solve his/her problems?
5. Will the deaf or severely hard-of-hearing pupil be seated in the regular classroom so that he/she has a good view of the teacher's face when instruction is being given and of the pupils' faces when they are speaking? Will sound amplification be provided if the pupil can profit from its use?
6. Are the parents and other members of the family interested in having the deaf or severely hard-of-hearing pupil assigned to a regular class to the extent of helping him/her with his/her home assignments? Will they help him/her develop solutions to problems encountered in adjusting to the regular class environment?
7. Are the pupil's confidence in his/her ability to function successfully in a regular class and his/her determination to do so sufficiently great?
8. Is the pupil willing and reasonably eager to be assigned to regular classes for instruction?
9. Is the pupil's ability to learn, as indicated by his/her test scores, average or above the average of the pupils in the regular class?
10. Is the pupil's chronological age within 2 years of the average age of the pupils in the regular class?
11. Will the pupils in the regular class accept the deaf or severely hard-of-hearing pupil as a member of the class and will they give him/her the same consideration they expect to give each other?
12. Is the teacher of the regular class informed regarding the problems faced by a pupil as a result of his/her lack or severe loss of hearing, and is the teacher willing and prepared to employ instructional practices and procedures that should be most helpful to the pupil?[1]

What are some signs that integration is not working?

Parents and teachers alike should be alerted to signs that a deaf child in an integrated setting is not progressing well. Some of them are as follows: repeated confusion over directions, announcements, and assignments; consistently poor academic achievement; inability to understand the basic vocabulary at a particular grade level; lack of interaction with classmates; establishment of lower standards of achievement for the hearing-impaired child; and growing disinterest of the student in his/her class or the school.

Can my child learn to feel comfortable around hearing people and associate freely with them if he/she does not go to school in an integrated setting?

Yes. Acceptance of and by other people is directly related to one's acceptance and understanding of himself/herself. A residential or day school for the deaf may have as much to offer a child in learning to accept hearing people and be accepted by them as an integrated program. Most schools for the deaf pride themselves on their relationships with the community at large and the development of a wholesome setting for social growth, which includes association with hearing persons in addition to staff members. A good school for the deaf concerns itself as much with the human

1. Richard G. Brill, *Administrative and Professional Developments in the Education of the Deaf (Washington, D.C.: Gallaudet College Press, 1971), pp. 81-82.*

development of individuals as with academic achievement, and this greatly enhances the potential of deaf children to interact freely with the world about them.

Will a residential or day school situation lead to future association with only deaf people?

When we think of the persons with whom our children will be associated, it is necessary to keep at least two important facts in mind. The first one is that it is impossible to live in our world and associate only with deaf people. The incidence of deafness is fortunately not very large, and most of the persons with whom your child will be in contact, no matter where he is, will be hearing people. Neighbors, family, friends, colleagues, and fellow workers are almost always hearing individuals. Second, every person, deaf or hearing, eventually will select the people with whom he/she wishes to associate. His/her choices will include both hearing and nonhearing individuals, for he/she will select his friends not on that basis but on the basis of other, more important feelings and reasons. He/she will select as his/her friends and associates those persons with whom he/she has common interests or common goals. He/she will want to be friends with those persons, both hearing and deaf, who accept him/her as an individual and respond to him/her. He/she will want to be with people who have similar values and who have a lifestyle which appeals to him/her. In other words, he/she will select his friends and associates the way you and I do.

In summary, what are some of the advantages of an integrated situation for deaf children?

An integrated school setting can offer the following advantages to a deaf child. He/she can remain with his family and experience a normal family life. He/she may also avoid travel to and from a residential school. If the child is outgoing, has some speech and speechreading skills, and is reasonably competitive, he/she will be challenged by hearing children and may be able to achieve at the rate of other children. An integrated educational setting also provides opportunity for the child to have hearing friends and the chances are that he/she will see his/her disability as less severe than in a segregated program.

What are some disadvantages, if any, of an integrated educational setting for deaf children?

Even under the best conditions, an integrated setting may not provide a deaf pupil the most desirable educational opportunity. This is especially true if he/she falls behind academically, loses confidence in himself/herself, or cannot relate freely and productively to other students. There are other conditions which might work against the deaf child's interests. For example, the deaf pupil might very well miss a great deal of the interchange which occurs between teacher and pupils and among pupils in the classroom. In a classroom where total communication is employed, all children can see every word which is signed or fingerspelled and pronounced on the lips. Thus, they are full participants in not only the instructional process but the social atmosphere of the classroom as well.

It is possible that a deaf student in an integrated classroom will not have an opportunity to know and to associate with other *deaf* young people. Not only do deaf children learn how to cope from each other but they inspire and reinforce each other psychologically. This is all a part of a child's learning to accept his/her deafness, to understand it, and to develop the courage and tenacity to overcome the inconveniences which may be imposed by it.

The Interpreter-Tutor Technician Program in Wausau

By Nancy Hagen
Program Director for the Hearing Impaired Program
North Central Technical Institute-Wausau

The 2-year associate degree interpreter-tutor program at the North Central Technical Institute-Wausau (NCTI) was designed to prepare graduates primarily for employment as interpreter-tutors in educational settings with deaf students. This program was initiated because of the need produced by the changing philosophy in deaf education. Due to Chapter 115 and the adoption of total communications (TC) by more day school systems, it has become necessary to provide support services for deaf students to integrate into hearing classrooms. The interpreter-tutor technician program hopes to fulfill this need.

The coursework in this program was designed to meet the needs of the deaf students from preschool to postsecondary school. Flexibility and adapting to individual classroom situations have been stressed at the paraprofessional level. Specific areas of training include: interpreting skills; tutoring; knowledge of deafness; knowledge of other exceptionalities; communications and language; psychology; and basic math skills.

The curriculum of the program is as follows:

First semester	*Second semester*
New Student Orientation	*Practicum II
*Practicum I	*Interpreting II
*Interpreting I	Communications II
Communications I	Technical Mathematics I
Economics	Psychology of Human Relations
American Institutions	
Third semester	*Fourth semester*
*Practicum III	Graduate Orientation
*Interpreting III	*Practicum IV
*Social Aspects of Deafness	*Interpreting IV
*Basic Vocabulary and Grammar	Tutoring for Hearing Impaired
Elective	*Exceptional Person
	Elective

* Asterisk indicates major subject.

In the interpreting classes (I-IV), the student learns basic sign language and develops his/her interpreting skills. These courses run in close cooperation with the practicum (I-IV) classes. In the practicum classes, the student is given the opportunity to put into practice what he/she has learned in interpreting. This is accomplished by hands-on experiences in a variety of classroom settings throughout Wisconsin.

The first three semesters of the program require 6 hours of practicum per week. During this time, the student functions with a deaf education teacher as a tutor and/or as a teachers aid from the preschool level to the high school level. During the third semester, the student begins practicum experiences at NCTI. The student works with an experienced interpreter in an integrated lab and lecture classroom situation. In the fourth semester, 9 hours of practicum experiences are required per week. The students are placed for month-long intervals in various day school programs in Wisconsin. Through this opportunity, the student is able to gain a better understanding of his/her role in the day-to-day function of the classroom.

The social aspects class provides a background knowledge of deafness. This includes the implications of deafness and how it affects all the areas of life - physical, emotional, mental, social, and psychological.

The tutoring class prepares the student to assist the professional teacher and the deaf student in the instructional areas of motivation, imparting knowledge, application, and evaluation.

The exceptional person class provides the student with a basic understanding of the exceptionalities such as blindness, mental retardation, learning disabilities, etc. This course is offered to provide the necessary background to work with a multiply handicapped deaf child.

The communications I, communications II, and basic vocabulary and grammar classes were incorporated into the program because the interpreter-tutor will be involved with language on a daily basis.

The graduate from the interpreter-tutor program should have the ability to interact successfully with other people in a wide variety of situations, an abiding concern for hearing impaired persons and their special problems, and an aptitude for communications and mathematical skills.

Mainstreaming the Hearing Impaired Student—A Two-Fold Problem

Unless hearing-impaired students are properly placed, mainstreaming will not only be ineffective, but can also be counterproductive. In addition to confusing the child, improper placement can slow or halt a hearing-impaired student's development and can actually undo some of the progress already made in special classes.

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To facilitate the decision-making of the administrator as to *when* and *where* a particular hearing-impaired student should be placed, we would suggest the use of the following checklist in evaluating each child:

> Is the child's ability to learn, as assessed by appropriate measures, within the range of average (or better) learners for the grade being considered for placement?
>
> Is the child's social and emotional maturity at a level that will be approximately that of the class to which

he/she will be assigned? Is his/her chronological age no more than 2 years in variation from the average age of the class?

Does the child use the skills of communication (listening which may be in the form of speechreading, speaking, reading, and writing) well enough to participate successfully with the intended peer group?

Will the child be able to pay attention to assigned work and to follow directions given for completing this assigned schoolwork?

Before mainstreaming any hearing-impaired child, you have to ask two questions. First, is the hearing-impaired student ready? And second, is the regular classroom ready for the child? Here we will concentrate on the many factors you should consider before deciding which particular classroom is best suited for which individual student. You can begin by asking these questions:

— Is the classroom teacher aware of the needs of children with hearing-impairments? Is he or she empathetic and willing to adapt assignments and teaching methods to meet those needs?

— Are auxiliary personnel available to assist the teacher in this process? Can they provide for specific learning needs not being met in the regular classroom?

— Will the number of children in the regular classroom allow the teacher sufficient time to assist the hearing-impaired child?

— Will the teacher be able to get other students to accept and befriend the hearing-impaired child?

— Can the child be seated so as to make optimal use of speechreading skills in comprehending the teacher and classmates? Will there be freedom of movement as necessary to maintain good communication with teacher and peers?

— If amplification is appropriate for the child, is the classroom conducive to proper use of such equipment and is the equipment available?

— Does the child with the hearing-impairment perceive himself/herself as capable of functioning in a regular classroom with others? Is the child interested in being in a regular classroom? Will he/she be willing to apply himself/herself to the academic and social tasks involved?

— Are his/her parents willing to help in the adjustments necessary to success in the regular classroom? Are they eager to have their child participate in a regular classroom at this time or do they have reservations?

— Has the child been learning through an "oral" or "manual" approach or a combination that involves elements that will not be part of the regular classroom? Can the child adjust to these changes in learning style?

Wisconsin Special Olympics Star Honored

Bart Starr awarded Kurt Schillinger with a gold medal for his tumbling performance at the Wisconsin Special Olympics in Oshkosh on Friday, January 28, 1977.

The Special Olympics is unique in format since it is open to only those students who participate in special education programs. These Olympics provide an opportunity for these special students to experience feelings of accomplishment and success. The idea of participation is strongly emphasized in the Olympics program. Competition between athletes does occur but groups for this competition are based on sex, age, and ability so as to promote the idea of participation for all the athletes.

Kurt is the son of Mr. and Mrs. Tony Schillinger of Schofield, Wisconsin. Kurt is a student at the Oshkosh Deaf-Blind Program in Lincoln School. During the school week, Kurt stays with Mr. and Mrs. Tim McKeon of Oshkosh which is a deaf-blind boarding home. On Friday, Kurt takes the bus home to spend the weekend with his parents and brothers.

DHC Administrator Reflects After One Year

By Philip R. Jones, Ed.D.
Administrator
Division for Handicapped Children

Approximately one year has lapsed since I assumed the position as administrator of the Division for Handicapped Children (DHC). Many of you know I was not totally unaware of Wisconsin's singular program for handicapped children. As an advanced graduate student (too many years ago), I had the opportunity to spend some practicum time in DHC and the local educational agencies (LEA) in the state. As a trainer of administrators of special education at Indiana University, I consistently utilized the Wisconsin Department of Public Instruction (DPI) and specifically the DHC in field experience practica relating to comparative state educational agency (SEA) organization, administration, and service delivery. Each group of advanced graduate students who participated in the experience concluded Wisconsin came the closest to having the necessary elements to indeed provide an appropriate program for *all* handicapped children.

Specific elements identified by students under my supervision included: Bureau for Crippled Children (BCC) as well as Bureau for Exceptional Children (BEC) located in DHC; Wisconsin School for the Deaf and Wisconsin School for the Visually Handicapped both operated by DPI; existence of legislatively created regional education units (CESA) covering the entire state; consistently strong state funding of special education; state and federal resources targeted toward one statewide program for the handicapped; highly qualified leadership personnel in SEA who did not fear removal from position for political reasons; and possibly the most important, a rapid growth in provision of services prior to mandatory legislation. It is not unusual that outsiders who had worked in states where these favorable elements did not exist would identify this list rapidly. That was the basic reason for using Wisconsin as a comparative state in this practicum assignment. Each year different states were utilized in the experience except that Wisconsin and Indiana remained as constants. Wisconsin was always rated as the most favorable state to accomplish the overall task of serving handicapped children.

By revealing this information to the readers of the *Bureau Memorandum,* I can assume you may now generalize as to some of my reasons for accepting the position with DPI. In addition to the list students identified, I could add such additional elements as cooperation among the training institutions, LEA's and the SEA; DHC-sponsored inservice training activities; and a generally favorable attitude of state government, the SEA, LEA's, and general public toward serving the handicapped.

As I reflect on the year in Wisconsin, I feel I have confirmed that all of the elements do exist (as well as others), and indeed Wisconsin may well continue in a leadership role in special education for the United States.

There are critics, however, who say Chapter 115 and P.L. 94-142 were unnecessary for a state like Wisconsin. There are others who say Chapter 115 does not work and needs modification and who suggest P.L. 94-142 has the same problems. All states also hear the current cry of too much paperwork, too many rules, and no time left for the teacher to teach. There may be some validity to the argument advanced on any of these issues or positions of the issues and we listen carefully to the arguments and modify the law, rules, data collection practices, etc., where appropriate.

The basic fact remains that all handicapped children are entitled to a free, appropriate public education whether we examine Chapter 115, P.L. 94-142, or the respective state constitutions. Does least restrictive alternative or environment mean every handicapped child will be in a regular classroom all or part of the day? It does not! This type of concept applies on an individual case basis after an assessment on the exceptional educational needs of any given child. Will all handicapped children be educated in a public school district? Will all 24-hour-care facilities be eliminated? No to both of those questions. The service delivery system dictated by least restrictive alternative again must be a continuum, and individual child needs (not system needs) should dictate placement.

Must parents be involved in M-team activites and development of the individualized education plan (IEP)? P.L. 94-142 is specific regarding parent involvement in IEP development and Chapter 115 intent would include parents whenever possible.

The IEP concept has been criticized by many both within Wisconsin and across the country. Since the parent is to be involved in the IEP development, the IEP planning conference in the fall or at the time a child enters a special education program or service offers a unique opportunity for the schools to communicate with and subsequently report to the parent at the end of the year or other district-selected intervals. Long-range goals and short-term objectives developed in the IEP with parental input and acceptance can subsequently become a major source of report at the end of the year. The teacher can review with the parent the progress toward the goal, achievement, or partial achievement of the objectives in addition to possible reasons why a goal was met or only partially met. The IEP utilized in this manner may allow any district to reconsider the use of other currently prescribed district reports on planning forms. It would appear to be an extremely effective reporting device.

During January 1977 one round of inservice activities for special education on IEP development was completed. We anticipate further inservice activities in this area for other district personnel in the future pending availability of funds.

Some of us who have been in the field of special education may recall "the good old days" when our jobs were easier. Maybe they were not as easy as they appear in the distant past. In fact I often reflect that basic infantry and advanced infantry training in the army were not really as bad as they seemed. On the other hand, I don't feel that was my opinion at the time I was receiving the training.

1977 promises to be an exciting year in special education in Wisconsin and in the United States. All of us need to work together to achieve our legislative, budgetary, or policy goals at the federal, state, or local levels but more importantly to serve each handicapped child appropriately.

PROFILE

Frances Kain

Frances Kain has been the classroom teacher of the deaf since I have been at the Cooper-Weisberg School, which is 4 years. In this time she has displayed a warmth and sensitivity for the children that makes the program an excellent one.

The class is so diverse that to orchestrate it is a major task. The children range in age from 6 to 13. The severity of their handicap ranges from profoundly deaf to severely hearing impaired. With Miss Kain in charge, the program becomes one of substance and direction that is necessary.

Her expertise in the area of total communication and her ability to use complicated equipment give the children in her classroom all the advantages any other excellent program would have.

Alan Nelson
Principal, Cooper-Weisberg School
School District of Superior

Frances Kain, who has been a valued professional staff member of the Superior school district since 1971, has made tremendous contributions to the education of the hard of hearing. She brought with her experience from other school districts and made the Superior school district a focal point in northern Wisconsin for the hard of hearing. Her empathy for children, her professional skills, and her adaptability to try other methods would rank her as one of the most skilled teachers in the state. With the addition of the Kostic Methodology in the teaching of the hard of hearing, Miss Kain has added another dimension in aiding the needs of children in special education classes.

Michael Verich
Superintendent of Schools
Superior Public Schools

Hearing impaired and deaf children in Superior and northern Wisconsin who attend the Superior day school program for the hearing impaired are indeed fortunate to have Frances Kain as their elementary teacher. She spares no effort to meet her consistently high teaching standards and never neglects an obligation. Handicapped children respond to her infinite patience and guidance.

Fran's unique training in deaf education and elementary education, as well as speech correction, serve her well as she effectively meets a hearing impaired child's exceptional educational needs with an individualized total communication emphasis. She has an excellent sense of humor and always remembers to thank others who have helped to provide a more effective educational program for her students.

It is a real pleasure to work with an outstanding teacher and special educator like Fran Kain.

Dr. Douglas J. Steuber
Director of Special Education
School District of Superior

Wisconsin Scoliosis Program for 1976-77

By Jeanne Schultz, RPT
Scoliosis Specialist
Bureau for Crippled Children

The 1976-77 Scoliosis program saw a marked increase in the number of schools participating in the screening program. Approximately 100,000 children between the ages of 10 and 15 were screened. Of this number, 1,693 children were examined by an orthopedist in one of the 25 scoliosis field clinics conducted throughout the state. Results of these clinics revealed 766 children with reported curves. Many of the children had such minor curves that all they required was medical observation while others required treatment consisting of a Milwaukee brace and physical therapy or surgical intervention. The BCC provided financial assistance for follow-up care to many of these families.

In July 1976, a questionnaire was distributed to county public health agencies and school nurses statewide inquiring about the status of their present scoliosis program or their interest in initiating a program in the near future. From this response, plans for the 76-77 program were begun. Those agencies and school nurses who responded positively to the questionnaire were informed of our future plans. Because of limited BCC resources, both personnel and monetary, an attempt was made to regionalize scoliosis services within the state. Previously, services were granted on an individual community basis but this was no longer feasible with the tremendous increase in participating schools.

Regionalization began with 15 sites being designated for scoliosis inservice programs. Local area public health nurses, school nurses, physical education personnel, as well as those from surrounding areas and neighboring counties were encouraged to attend. The inservice program consisted of:

(1) A slide presentation with basic explanation of postural deviations and the screening procedure for detection of scoliosis.

(2) A 16-mm movie, "Scoliosis Screening for Early Detection," was presented and is available on loan from BCC for the purpose of educating school-aged children, parents, school personnel, and the general public.

(3) A demonstration of the screening technique using the grid and a class of children. An opportunity was afforded for individual participation.

(4) Small group, informal question and answer period.

(5) Various written information was made available for distribution to local medical doctors and to the general public.

Scoliosis Public Awareness Activities

The need for widespread education to increase public awareness and sensitivity repetition to the problem of scoliosis has long been recognized. In an effort to meet this need, five copies of the film mentioned above, "Scoliosis Screening for Early Detection," were purchased to be shown to school-aged children prior to screening and to parent groups. As indicated above, these films are available upon request through the Bureau for Crippled Children and are now being circulated within the state for use in the schools. In addition, much of the existing informational material has been revised, updated, and added to; and other relevant resource materials purchased.

We feel that one objective of scoliosis programs should be to create an awareness of the condition in all the students. If they and their parents and teachers know what scoliosis is and what to look for, formal screening could be stopped and the state could save thousands of dollars each year. Therefore, we urge all programs to plan for specific health education at the time of the screening.

It is our intent to provide diagnostic clinics statewide in which these children who have failed a second rescreening in school can be examined by board-certified orthopedists. However, many factors may make this impossible. The child with suspected scoliosis should then be referred through local medical channels either to a general practitioner, pediatrician, or orthopedist as a private patient.

The primary purpose of the screening program is to detect curves early and obtain the opinion of an orthopedist. There is no known way to prevent scoliosis. Early detection is the only way to prevent it from becoming a severe problem. As always, early detection is better than late correction.

Visions of the Print World

By Andrew Papineau
Supervisor for the Visually Handicapped
Division for Handicapped Children

A blind child's world of print is limited when the only available reading material is braille. The selection of his/her favorite novel of the month to read is months away for the blind-either to wait for the recorded form or braille. To obtain, a reader takes the inner most self away from the novel, creating a superficial leisure activity.

However, the blind now have available to them a dynamic and versatile piece of equipment which offers them immediate access to the world of print. The electronic device called the Optacon (OPtical-to TActile-CONverter) is a small hand camera which the blind child moves across the printed page.

Visions of reading the daily sport page, Ann Landers, package labels, and personal letters are now a reality. The potential for vocational training is widely expanded due to the computer programmer reading the print out, a blind secretary reading what is being typed, and filling out printed forms.

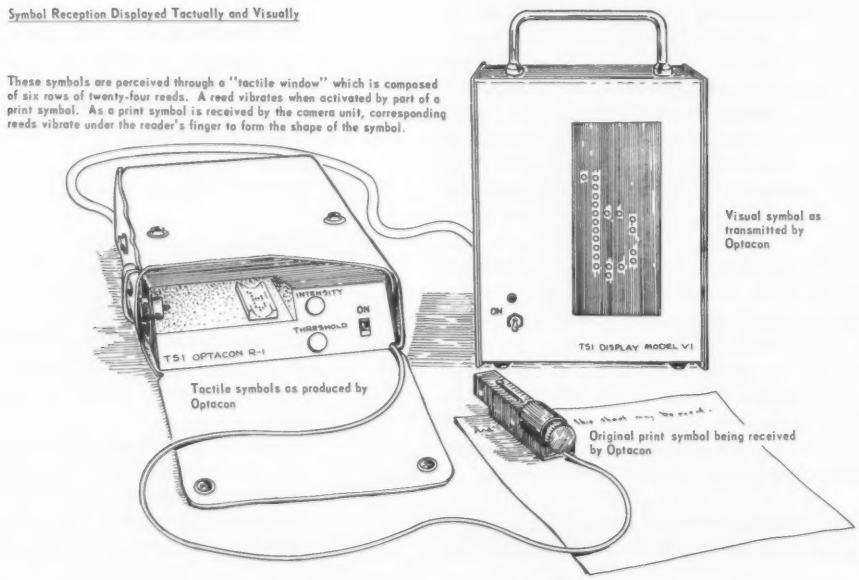
This past summer, Wisconsin was given the opportunity through a grant from the Department of Health, Education, and Welfare (HEW) and Title VI-B to acquire nine such Optacon units for day school programs and the Wisconsin School for the Visually Handicapped in Janesville. The teachers of the visually impaired participated in an intensive training period for 2 weeks under the direction of Gaylen Kapperman, Ed.D. of Northern Illinois University. The training involved the process of teaching a blind child how to use the Optacon-themselves pairing off and one simulating the blind person with blind-fold and reading the tactile array with the finger while his/her partner checked their work using the visual display. The tension and perspiration were evident, but upon graduation, the teachers were competent in going back to the classroom and beginning to work with their students.

From reports received, visions of print have continually unfolded. One student is able to read 50 words a minute and going. Another is in the process of identifying the individual letters, while another is reading todays newspaper.

This is another example of the developments for the visually impaired population. That, although handicapped, given the opportunity and appropriate program, the outcome can be a productive and meaningful livelihood. It is through the efforts of the teachers of the visually impaired that Optacon training will flourish until such time as another device is on the horizon.

This device is a Kurzweil Reading Machine which converts print to speech and is currently in the testing stages. Wisconsin may be fortunate to be one of the test sites, which illustrates the interest taken on behalf of professionals in the area of the visually impaired.

As you read this *Bureau Menorandum,* stop to think of the print world and how it is acquired in our society.


Symbol Reception Displayed Tactually and Visually
These symbols are perceived through a "tactile window" which is composed of six rows of twenty-four reeds. A reed vibrates when activated by part of a print symbol. As a print symbol is received by the camera unit, corresponding reeds vibrate under the reader's finger to form the shape of the symbol.
INTENSITY
ON
THRESHOLD
TSI OPTACON R-1
Tactile symbols as produced by Optacon
ON
TSI DISPLAY MODEL V1
Visual symbol as transmitted by Optacon
Original print symbol being received by Optacon

P.L. 94-142 Update

By John Stadtmueller
Administrator, Title VI, EHA
Division for Handicapped Children

New legislation under Public Law (P.L.) 94-142 as a mandated law will require some new direction and new consolidation of efforts and procedures with reference to Chapter 115. At the time of the writing of this article, all matters have not been finalized under P.L. 94-142 but every indication points toward conditions under the bill to be similar to those expressed in this article. Many of the points have been covered to some degree in a brief article in the Volume 18, Number 2 issue of the *Bureau Memorandum* so all matters may not necessarily be new to the reader.

Special education as expressed in our state law as well as the federal law under P.L. 94-142 results in implications for programming for children with exceptional educational needs (EEN) with such implications being interwoven between various regulations. Much of the court action since 1972 has been directed toward establishing the *right to education.* The effort at this stage must now be pointed toward the *implementation* of the right to an education as well as *assuring the quality* of the education. Previous court action would suggest some general assumptions that are present in both Chapter 115 and P.L. 94-142:

1. All children can learn. The state has the responsibility to educate all children and as such cannot exclude the handicapped.
2. Handicapped children are entitled to a "free and appropriate education" suited to their needs.
3. Handicapped children should be placed in the least restrictive program arrangements.
4. No handicapped child can be excluded for a placement or program without first having a procedural due process related to the entire situation.
5. There must be a continual census of the handicapped population along with active involvement in locating unserved children so that schools can plan programs, plan for appropriate funding for such programs, and plan for including all handicapped children in the total school community.

With the above assumptions in mind, one can see that all of these areas are vital to total programming for children with EEN and that all efforts must be directed toward fulfilling these assumptions.

With the concept of appropriate programming for all EEN children, there is a need to review some of the key elements and concepts in both Chapter 115 and P.L. 94-142. In turn, we will need to provide emphasis on what direction these elements might take in order to adequately handle all programming assumptions for handicapped children:

1. As mentioned in a previous article, the concept of the *single line of authority* would suggest that we may now have a broader scope of programming efforts under the concept of the public school. The single line of authority indicates that the state superintendent of public instruction is responsible for making sure that appropriate programs are developed and maintained for all Wisconsin's EEN children in public school programs, programs operated by state agencies, and where practical, programs in private schools which provide a free and appropriate educational program. While the implications for a single line of authority are not defined, there is the assumption that quality of programming efforts will be assured to all EEN children throughout Wisconsin. This could mean that the public school sector may eventually have additional responsibilities for EEN children residing in the respective geographic area of the public school.

2. P.L. 94-142 clearly points out that all local educational agencies desiring to receive funds under this program must develop a written, detailed local educational agency *plan/application.* Up to the present time, school districts operating programs for handicapped children have been working with annual plans of service and, more recently, have been involved with a program narrative statement. The new application for P.L. 94-142 appears to be more comprehensive requiring the local educational agency to follow the steps of the state plan which is submitted to the federal government. The local educational agency plan must be addressed to the matter of *intent* as well as *operational procedures.* Here again details for this local educational agency application/plan have not been finalized but the approach for submitting an annual plan of this nature will be somewhat different than past practices.

3. There appears to be a need to tighten up the concept of *rights for children.* While we do have an excellent operational framework dealing with the matter of rights for children, it will now be necessary to reexamine our entire operation with regard to record keeping, confidentiality, nondiscriminatory testing, least restrictive placement, and the entire matter of

due process procedures. It should be stated that our present level of operation in Wisconsin generally covers this point quite thoroughly, but it will probably be necessary for these matters to be *documented* in order to comply with the mandates of P.L. 94-142.

4. For many years, Wisconsin has had a practice of serving all handicapped children that are known to the public school sector with no child being denied an educational program without extreme extenuating circumstances. The number of known handicapped children not provided an educational program at the present time in Wisconsin would be very minimal. However, under P.L. 94-142, the direction calls for an active procedure for finding children who are not known to be in appropriate programs at the present time. The emphasis here addresses itself to primarily the unserved child. Under P.L. 94-142, districts who wish to receive funds must show evidence and provide assurance that there are no unserved handicapped children in their school district regardless of the situation. The further implication is that school districts would be actively involved in *child find procedures* and practices in the event that there was no absolute assurance that all handicapped children are appropriately programmed. This area of emphasis is somewhat new and will require some tooling up in order to meet the mandates of P.L. 94-142 as well as Chapter 115.

5. It has been general practice that all children in special educational programs are provided an individualized approach to their educational program. However, under Chapter 115 and P.L. 94-142 this is no longer left to chance. Both pieces of legislation require that an individualized education plan (IEP) be developed for each EEN child and that such an IEP be developed by a group of professionals and include input from the parents and in some cases the child. This implies that there are new responsibilities for special education administrators as well as special education teachers. Again, while it has been a general operational practice to have an individual plan for each exceptional child, new mandates now *make it a requirement that this plan not only be developed and implemented but that it also be documented.* This entire IEP process will require considerable attention in order to comply with both state and federal laws.

6. Under both Chapter 115 and P.L. 94-142 there is a condition that *evaluation* is no longer left to chance but is required both in the area of total programming efforts as well as on the progress of each EEN child. At the present time, all details regarding this total evaluative process have not been worked out. Plans are under way for the evaluation of total special education programs through a site visit arrangement during which the various programming elements and exceptional conditions are specified as to their compliance with both Chapter 115 and P.L. 94-142. It must be noted that in order to gather information on the effectiveness of individualized programming efforts per child there is need for considerable effort in working out arrangements on how such evaluations might be documented and reported. At any rate, the entire concept of evaluation now will become an active measure with emphasis on accountability.

7. One of the unfortunate elements that follows the passage of public law is the expanded treatment of *reporting.* The general feeling is that we in education do too much reporting and often times spend our efforts in reporting, drawing time away from the educational procedure with children. Chapter 115 has had requirements for reporting which have been reworked to the point where the reporting of data is held to a minimum requiring only that which is necessary in order to operate and to comply with the law. However, P.L. 94-142 appears to add many more data requirements to the reporting process. This will no doubt cause some concern on the part of all administrators. It should be stated that the federal law will force additional reporting requirements on the school districts which is far and above that which is necessary under Chapter 115. Persons in the field will no doubt be very critical of the added reporting data requirements, but it should be known that the Division for Handicapped Children cannot be held responsible for additional reporting requirements over and above that of Chapter 115. At the present time, plans call for a review of all data requirements with heavy emphasis being given to removing any unnecessary data reporting in both Chapter 115 and P.L. 94-142. Efforts will be made to coordinate reporting forms under both laws so as to minimize where ever possible the data reporting requirement.

8. One of the chief things implied in programming for handicapped children and included in the intentions of Chapter 115 and P.L. 94-142 is the entire matter of *program improvement* which should lead to the resulting improved educational offering to each handicapped child. In order to carry out this total "improvement concept," it will be necessary to investigate new instructional approaches and involve educators and parents in a continual inservice-type approach to up-grading knowledges and skills. Professional persons in the field of exceptional education generally are not concerned with the matter of improvement, as their whole approach to working with exceptional children is to provide the best education possible to meet the needs of children in their charge. In Wisconsin, we look at the *process of improvement* as being very productive as well as being very acceptable to professional educators.

9. In dealing with the federal government there appears to be an entirely new area to consider, namely that of *compliance.* Generally it can be stated that professional educators working with exceptional children have always attempted to do the best professional job possible with exceptional children. There is no question that Wisconsin has had and maintains one of the better programs for exceptional children in the

nation. The concept of "compliance" indicates that in doing all the things we do with children we must now *document* that we are accomplishing the things that are necessary to meet the mandates of the law. The concept of compliance further implies that there will be some type of remediation necessary for those "out of compliance" school districts and professional persons in order to make total programming efforts be in compliance with the law.

10. There has been a growing effort for interaction with all elements of society in providing programs for exceptional children. This growing effort has had a very strong involvement with parents as one of the consumer elements of the educational process. As such, advisory committees have been operating for some time and have been very helpful in the total educational scene. Chapter 115 brought about the Council for Exceptional Children which is a very active advisory committee working to improve total educational programming. Under P.L. 94-142, there is a requirement that the state must now have an advisory panel. This *advisory panel* will continue on with the work accomplished by the Council for Exceptional Children but will take on the flavor of providing much more in the way of "direction" as opposed to actual involvement in up-grading programming concepts. In this regard, the advisory panel under P.L. 94-142 is charged with being advisory in nature and yet having the responsibility for advising the state educational agency on unmet needs; commenting on rules and regulations and offering direction in this regard as opposed to actual involvement in the development of rules and regulations; and assisting the state in an advisory capacity on developing and reporting program information and evaluations to the Wisconsin legislature as well as to the assistant commissioner of education in charge of the Bureau for Education of the Handicapped at the federal level. The concept of advisory committees and/or advisory panels is generally thought to be only at the state educational level but it would appear helpful if advisory committee-type activities were available at the local educational agency level.

The above ten areas are not the only areas that will require a closer look at total programming efforts but these appear to be the ones that would require the greatest effort in the foreseeable future.

In order to tool up for all of the areas listed above so that our total programming efforts for children with exceptional needs can be improved, there are some underlying efforts that must be examined so that the ten program elements may become a reality:

1. It would seem necessary that local administrators examine program offerings for exceptional children with a view to arrive at total programming concepts so that the needs of all exceptional children can be met. In this regard if school districts are not able to program for all exceptional educational needs, it may be necessary for districts to combine their efforts with other districts to work out intermediate-type special education programming arrangements. There could be a variety of such approaches to include such provisions as sharing services with districts, contracting for services and programs with various CESA programs, or where necessary, buying services to help implement local efforts.

2. It will be necessary for the state educational agency to work closely with local educational agencies to develop and implement the local application/plan necessary to receive funds under P.L. 94-142. It must be noted that a few districts may not want to receive funds under P.L. 94-142 and therefore it may not be necessary to develop a local application/plan. However, it should be noted that under Section 504 of the Rehabilitation Act of 1973, all appropriate educational programming arrangements for handicapped children must be carried out. Therefore, while a local educational agency may not wish to become involved in receiving funds under P.L. 94-142, it would still be necessary to comply with all appropriate programming efforts in meeting the needs of exceptional children. Therefore, it would appear to be to no advantage in not becoming involved in the funding arrangement under P.L. 94-142 since the actual programming efforts must be accomplished anyway.

3. It will be necessary to review our entire process of *data management* looking at new ways to collect and report data from the local educational agencies to the state educational agency. It is conceiveable that this entire process might require a total up-date in our ability to handle information on children and programs in a confidential and efficient manner.

4. There is need to place emphasis on the *entire matter of evaluation*. We will need to work out a system for evaluating total programs, as well as to evaluate and report in an aggregate manner, the effectiveness of individual educational plans.

5. It will be necessary for us to look at new ways to *involve parents* in the entire process of planning and programming along with the sharing of responsibility in this total effort.

6. In order to comply with Chapter 115 and P.L. 94-142, it will be necessary to develop an *over-all statewide plan* for the operation of programs and services for all EEN children in Wisconsin. This plan must be designed to meet all the requirements of both Chapter 115 and P.L. 94-142 while at the same time having the Wisconsin flavor for local autonomy and responsibility.

The above information and comments are not inclusive of all the conditions and concerns of Chapter 115 and P.L. 94-142. It should be noted that the above somewhat parallels some of the highlights for P.L. 94-142 as expressed in a previous article in the Volume 18, Number 2

issue of the *Bureau Memorandum*. The intention of the above comments is to merely point out the new responsibilities and directions that must be considered in our total programming efforts for all EEN children in Wisconsin.

The article under Federal Programs following this article points to other areas of interaction to total programming to our exceptional children from the standpoint of federal impact.

Federal Programs

Overview of the Wisconsin Resource Center

By Nancy Byfield
Coordinator
Wisconsin Resource Center

The federal government, through the United States Office of Education-Bureau of Education for the Handicapped (USOE-BEH) has funded 13 regional resource centers throughout the country.

The Great Lakes Area Regional Resource Center (GLARRC) is one of 13 centers in a national network established under Title VI-C of the Education of the Handicapped Act designed to serve a specific geographical area of the United States.

GLARRC serves region 6 and is composed of the Indiana, Michigan, Minnesota, and Wisconsin Resource Centers operated by each of the respective state public education offices.

The Wisconsin Resource Center is part of a total national effort to provide assistance to state agencies in areas where additional emphasis is needed. The Wisconsin Resource Center is administratively placed within the Division for Handicapped Children. It is a component of the federal program section providing supportive services to the Bureau for Exceptional Children. John Stadtmueller serves as director of the Wisconsin Resource Center and Nancy Byfield is the coordinator. The staff includes William Berkan as case consultant, Sharon Berkers as administrative assistant, and Mary Endres as secretary.

The request for proposals (RFP) used as a mechanism to generate the 13 regional resource centers and the corresponding state resource centers pointed out and called for assistance at the origin of the instructional process; namely, that of basic assessment to determine educational needs. In addition, another major priority in the RFP was that of emphasis on appropriate programming for the individual child. The third major emphasis was that of sharing information, effective assessment, and programming techniques to as large an audience as possible.

The Wisconsin Resource Center in following this RFP beginning in 1974 arrived at three major areas of activity: (1) Assessment and evaluation-direct services in arranging for evaluation of severely impaired children; (2) Programming-covered mainly with in-service type activity and which took the form of locally based in-service activity or regionally or statewide sponsored emphasis around the entire area of output or programming so designed to help teachers, administrators, and parents work more effectively with children; and (3) Dissemination-in-service activity as well as the sharing and distribution of printed material that could be helpful to persons working with children with exceptional educational needs (EEN).

The above three areas, while not the only areas needing emphasis, were a valuable resource and asset in part provided by the Wisconsin Resource Center to the Division for Handicapped Children of the Wisconsin Department of Public Instruction.

The direct service component of the Wisconsin Resource Center provided the purchase of assessment and evaluation services for children who needed additional diagnosis and evaluation beyond the locally available resources. Children most likely eligible were those who had already been evaluated by local resources through multidisciplinary team activity but still presented assessment and educational problems requiring additional services. The Wisconsin Resource Center has assisted multidisciplinary teams with the evaluation of 135 children.

As of January 31, 1977, there were no funds available for direct service activities although the Wisconsin Resource Center will continue to assist local educational agencies in finding appropriate evaluation services. The rationale behind the extinction of direct service funds is that the USOE-BEH no longer views this as an area of primary deficit. It is felt the local educational agencies have had time

to improve their local assessment techniques as well as the utilization of local resources.

With the implementation of Chapter 115 and Public Law 94-142, local educational agencies are screening increasing numbers of children with suspected educational needs and developing individual educational plans for those requiring special education services. The Wisconsin Resource Center has funded and assisted local educational agencies (LEA) in the implementation of inservices dealing with techniques of individualized assessment and program planning. To date, the Wisconsin Resource Center has been involved with aiding approximately 75 localities. Many of these inservices have been a cooperative effort with other funding sources.

More specifically, the inservices have dealt with issues such as improving behavior management skills, assisting regular education teachers to assess and evaluate children having exceptional educational needs, and improving teaching techniques relative to various handicapping conditions. Nondiscriminatory programming is an area given major emphasis. It is hoped that a model will be developed which can be duplicated throughout the state in local educational agencies having minority populations.

Public Law 94-142 has given the Wisconsin Resource Center additional areas of priority for the ensuing funding period which is February 1, 1977 through August 31, 1977. In addition to the implementation of individual educational plans and nondiscriminatory testing, emphasis will be given to concepts such as least restrictive placement, parent surrogate, and due process. The thrust of the Wisconsin Resource Center activities for the ensuing months will be to assist local educational agencies implement Public Law 94-142.

Report to the Wisconsin Legislature from the Council on Special Education

Chapter 89, Wisconsin laws of 1973, now Chapter 115, Subchapter IV, established a 15-member Council on Special Education. The Report to the Legislature was prepared by the Council under the provisions of section 115.79 (2), Wis. Stats., "The Council may report biennially to the legislature on the progress made by special education programs and planning in the state and any other information it deems desirable." The Council also provides consultation on special education to the state superintendent of public instruction.—Wilbur Kalinke, Chairperson, Council on Special Education.

Chapter 89, Laws of 1973, was passed to assure exceptional children of their constitutional right to a free public education. The law, now Subchapter IV of Chapter 115 of the statutes, requires that local school districts ensure that appropriate special education programs are available to children with exceptional educational needs (EEN).

Wisconsin has reason to be proud of Chapter 115 and progress in its implementation by the state educational agency (SEA) and the local educational agencies (LEA) during the past 3 years. The federal law (P.L. 94-142) mandating education for all handicapped children was anticipated by 2 years. Many LEAs have already fulfilled requirements of the federal law due to their rapid compliance with the state law.

Areas of Concern to the Council

Like every new program, Chapter 115 has suffered growing pains. Teachers, administrators, and support personnel have had to adjust rapidly to the new law and the increasing numbers of children identified with EEN. Parents and children have also had some adjustments. Reality sometimes falls short of the hoped for benefits of new programs.

1. Noncomplying Districts—Some districts are not measuring up to the overall state record of serving identified children. Apparent reasons for these delinquent districts include: historic practices and procedures; administrative or board decisions about compliance with the law; genuine concern about the instability of funding sources; and uncertainty about enforcement procedures.

2. Inappropriate Placement—Some children who have been identified and placed in special education programs are not being served appropriately. In some cases parents have expected too much of the schools, but in other situations children with complex needs are not being well served. Council members are aware of a few families in desperate situations because of inabilities or failure of some schools to meet special needs of children with EEN on a day-to-day basis.

3. Mainstreaming the EEN Child—For some children, placement problems may be related to the concept of "mainstreaming" or placement in the "least restrictive alternative." SEA staff consultants have cautioned that appropriate support services must be available when a child is integrated for part of the day in regular education classes.

Both regular education and special education teachers are concerned about these problems of integration of children with EEN into regular classes.

Regular education teachers tell of initial acceptance of children with EEN, followed by increasing difficulties in adapting materials, keeping essential records, and changing methods of presenting materials. They worry about poor communications among EEN staff, parents, and themselves. They know that good communications are needed to enhance the learning of each child and to facilitate behavior management when necessary.

Special educators see the other side of the problem - the inability of the regular education teacher to carry out regular education objectives with the child who has EEN, to use needed special techniques, and to communicate with and use the special education teacher as a resource.

All mainstreaming situations may not exhibit these problems, but some students (and teachers) are suffering because of unrealistic plans and time constraints which preclude the needed communication for effective cooperation.

Inservice and preservice training needs to be improved to prepare regular teachers to understand the characteristics of various handicapping conditions as they relate to the learning and development of each child.

4. Records and Reporting—One problem that has been widely discussed is that of "too much paper work." Some reporting is necessary for the accountability that assures the proper use of tax money. However, the Department of Public Instruction, Division for Handicapped Children, has reported a reduction of 15% in paper work.

The Program Narrative Plan has also required a great deal of local and state staff time in 1976. In the future the plan will need to be amended only in areas of significant change. The Program Narrative Plan, a requirement of both state and federal laws, is an attempt to address quality of service as well as quantity.

5. Appeals—An appeal procedure is a necessary part of legislation which guarantees a constitutional right. Appeals, when necessary, reflect problems with the implementation of the law.

Relatively few appeals have been initiated thus far. Fifteen of the approximately 25 local appeal decisions since the passage of the law were referred to the state superintendent of public instruction. Division staff, acting on behalf of the state superintendent, required districts to reconvene an M-team, as necessary, to formulate an appropriate individualized education plan (IEP). In some cases, part of the original plan had been appropriate and other conditions needed attention. In a few cases, it was necessary to order the release of records or state that suspension and expulsion are not appropriate tools to meet exceptional educational needs. The decisions have been designed to serve individual cases and have not been arbitrary findings for the district or for the individual concerned.

The department and the council are recommending a few changes in the statutes and the rules to bring Wisconsin law into compliance with P.L. 94-142 and to alleviate some of the faults in the present appeal process. These changes are noted in the section titled, "Recommendations to the Legislature."

6. Parent Rights and Responsibilities—The requirement of parental consent for evaluation and placement of a child and the right to appeal inappropriate placements are a part of the law.

There is reason to believe that some children are not being appropriately served but whose parents do not appeal because of the cost of hiring an attorney or because of social or other pressures. In other cases, parents refuse to give consent for evaluation and placement for children who seem to need special education.

Administrative rules provide an avenue for opening the dialogue necessary to serve children with EEN more effectively. PI 11.03 (4) and (7), Wis. Stats. spell out the right of parents to be involved and consulted in the M-team process for their own children and the right to have an advocate present if they so desire.

Parents need to know their rights and responsibilities when seeking appropriate education for their children with EEN. They need to know of their right (section 118.125 Wis. Stats.) to see and challenge the educational records of their children. They need to know of their responsibility to work hand in hand with the teachers of their children so that skills taught in the classroom are reinforced at home. Without parent involvement, participation, and cooperation, the end result will be a job half done, a goal never quite attained. The losers will be expectional children. Parents may need to be encouraged to recognize that their ideas and cooperation are needed. Teachers will need to have the time to talk to individual parents.

7. Funding of Special Education and the Impact of P.L. 94-142—Most districts appear to be meeting the intent of the law but their continued ability to do so rests on the availability of funding to cover the excess costs of educating children with EEN. The present 70% state aid for salaries of enumerated special education personnel, special transportation, and certain other program costs was designed to help cover the excess cost. It is estimated that this formula covers approximately 50% of the total costs of special education. The Council on Special Education strongly supports the continuation of 70% state aid, at least until a suitable formula is devised to insure that 100% of the *excess costs* of educating children with EEN is available.

Sum-sufficient funding of state aid for special education would assure the districts that new programs would be funded at the 70% level. If sum-certain funding is continued, the necessary funds must be budgeted at a level that will not penalize districts for serving additional exceptional children in compliance with the law. The state is protected against open-ended spending because the number of children with exceptional educational needs is limited to 12% of the general school population.

Budget requests for the 1977-79 biennium reflect the increase of children served during the past biennium as well as the projected increase during the next 2 years. This is one of the few areas in education with increasing, rather than declining, enrollments. A very limited amount of funding in the administrative budget of the Department of Public Instruction is expended for supervisory personnel in special education. Special education biennial aid requests are returned to local school districts for the purpose of assisting in the delivery of programs and services to children with EEN.

Public Law 94-142 recognizes the necessity to fund the excess costs of special education and offers a source for pass-through funds for LEAs starting in fiscal year 1978.

As indicated earlier, P.L. 94-142 embodies many of the provisions of Chapter 115. It requires full service goals, guarantees of complete due process procedures, assurances of regular parent or guardian consultation, maintenance of individualized programs for all handicapped children, and the right to a free public education for all handicapped children.

Wisconsin officials must be aware that federal money under P.L. 94-142 must be used to *supplement* and not *supplant* state and local funding efforts. Wisconsin should not be penalized in its eligibility for federal funds because of early passage of Chapter 115, but must use the federal funds according to the federal priorities: first, to serve children who are not receiving an education and second, to serve children with the most severe handicaps who are inadequately served.

Recommendations to the Legislature

1. Support of 70% state aids at a sum-sufficient level and recognition of responsibility to fund 100% of *excess costs* of special education (cost above that of average per pupil cost).

2. Support of Wisconsin's full eligibility for federal funds under P.L. 94-142, which must be used to *supplement and not supplant* state and local funding.

3. Support for proposed State Department of Public Instruction amendments to Subchapter IV of Chapter 115 including:

   a. Parents' right to receive a full transcript of the hearing in the appeal process.

   b. Requirement that a hearing officer (and not the board of education) must conduct hearings in the appeal process at the local level and make recommendations to the board of education for its decision. (P.L. 94-142 requires an independent hearing officer.)

   c. Pupils subject to expulsion or repeated suspension shall have the opportunity, with parental consent, for M-Team assessment if there is reasonable cause to believe that the pupil has an exceptional educational need.

   d. Assuring right of majority to pupils with EEN between the ages of 18 and 21. (Self referral and consent for placement.)

   e. Clarification of least restrictive alternative language in section 115.85 (2) (c), Wis. Stats. allowing private, nonsectarian in-state placement for special education before out-of-state placement in a public special education program. "Preference shall be given to educational programs which will allow children to reside in their own homes when appropriate."

4. Support for amendments to section 115.81, Wis. Stats., parental appeals, which the council is considering for early submission, concerning:

   a. Training and certification of hearing officer, role definition of hearing officer, and relationship of hearing officer to local boards.

   b. Use and payment of independent examination.

   c. Shared funding of appeal process by SEA and LEA.

5. Support efforts to expand dissemination of information and training activities for parents and educators.

6. The state superintendent of public instruction has recognized the expanded role of the Council on Special Education to include the council as mandated by P.L. 94-142. The council requests legislative support for an independent budget and staff.

The Promise of Chapter 115

Wisconsin's mandatory education law for children with handicapping conditions will continue to require dedication, skill, staff, time, and tax dollars but the benefits more than compensate for the frustrations when we hear of individual children who begin to achieve to their potential. Here is one example:

John, an extremely intelligent 6th grader, required several evaluation sessions by the M-Team before he was appropriately programmed and placed. With the cooperation of community resources, his disability was determined to be pseudo-myopia, caused by spasms in the involuntary eye muscles which give him both symbol and color distortions.

His capabilities and high potential for learning were early recognized but his inadequate performance led his teachers to classify him as lazy. Pressure to achieve merely intensified his difficulties in reading and writing and created frustrations for all involved - child, teachers, parents, and even siblings.

Now that John has been properly diagnosed, he receives supplemental help as needed from his teachers, help that he has a role in planning. The possibility of behavior problems has been minimized and his potential will not be wasted. It appears that this child will no longer need special education.

This is the promise of Chapter 115.

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The Wisconsin Voice Survey- Selected Results and Their Implications

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Relatively few surveys have dealt with the prevalence of voice disorders in children. Baynes (1966) surveyed the incidence of chronic hoarseness among children and found an occurrence rate of about 7%. Wilson (1972) indicated an overall incidence of approximately 6% to 9%, while in a nationwide sampling of over 1,400 public school speech clinicians, voice problems represented 2.3% of the clinicians' case load (Bingham et. al., 1961).

Shearer (1972) and Silverman and Zimmer (1975) suggested that a rather large number of school-age children exhibit chronic hoarseness. The latter study cites an incidence figure of 23.4%, which is alarmingly high in spite of the fact that the authors admit to a somewhat biased sample. Similar percentages were reported by Cook and Palaski (1975). These data appear to substantiate Wilson's (1972) contention that "many speech clinicians feel voice disorders in children are on the increase." Whether this is due to an actual increase in children afflicted with voice problems or to keener ears and increased diagnostic sophistication on the part of the clinicians remains to be seen.

Past experience has demonstrated that speech clinicians are frequently reluctant to deal diagnostically and therapeutically with voice disorders. Inadequate training and/or case management priority factors may in part be responsible for this unfortunate situation.

A number of pertinent questions of importance to clinicians in the field and to the training institutions and professional associations serving them need to be answered. The present survey was an attempt to answer some of these questions.

In February 1976, a 22-item questionnaire was sent to members of the Wisconsin Speech and Hearing Association. Of 889 questionnaires sent, 243 or 27.33% were returned to the investigators.

It is not the purpose of this paper to present all of the results of the questionnaire. Rather, we would like to discuss the implications of a few selected responses which we found to be of particular interest.

Results

The largest percentage of the respondees were school clinicians (59.67%). Since the returns from other employment settings were small, it was decided to only incorporate school clinician data into the presentation of the results of the survey. In light of current legislation in Wisconsin, requiring school clinicians to provide services to every individual between the ages of 3 and 21 who, because of some physical, emotional, or mental disability may

experience learning difficulties, this seemed to be a logical and pertinent choice.

Educational background, professional association membership, and certification status of the public school clinician who responded to the questionnaire were as follows. The baccalaureate degree was held by 55.17%; 44.83% reported to have a masters degree. While 100% of the respondees belonged to the Wisconsin Speech and Hearing Association, only 37.24% were members of the American Speech and Hearing Association (ASHA). The Certificate of Clinical Competance in Speech Pathology (CCC-SP) was held by 24.13%, Certificate of Clinical Competance in Audiology (CCC-A) by .68%, and 2.04% reported dual certification. Thus, a total of 26.85% of the respondees had ASHA certification.

The average yearly case load of all clinicians holding a bachelor's degree was 3,812 cases of which 3.59% represented voice disorders. Of this number, 96% were children and 4% were adults. Clinicians with master's degrees had an average yearly case load of 2,890 with 3.87% being voice cases; 99% children and 1% adults.

For both groups of clinicians, most referrals came from teachers. However, the majority of the clinicians required some type of laryngeal examination before initiation of voice therapy.

Voice disorders encountered mainly fell into the categories of vocal abuse and vocal nodules. Polyps, papilloma, contact ulcers, pubertal changes, spastic dysphonia, dysphonia ventricularis, and endocrine dysphonia constituted a small percentage of the total voice case load.

The most frequently cited dismissal criteria was reexamination by a physician, followed by a judgment of acquisition of "good" voice on the part of the client.

The responses to the question, "Do you feel that your university training fulfilled your needs in the area of voice diagnosis and therapy?" were as follows: 87.72% of the clinicians holding the master's degree felt that their undergraduate training was inadequate and 60.66% held the same opinion of their graduate training in the area of voice. Of the clinicians holding a baccalaureate degree, 87.86% expressed dissatisfaction with their undergraduate preparation.

Finally, most respondees expressed an interest and a need for continuing education in voice and voice disorders. "Therapeutic techniques" was the most frequently suggested topic.

Discussion

The results of this survey indicate an occurrence rate of voice disorders among Wisconsin school clinicians' case loads of between 3.5 to 4%. This percentage is lower than the one cited by Wilson (1972) and higher than the figure given by Bingham et al. (1961).

Most of the other data presented here are self-explanatory and do not warrant any further discussion.

However, the large number of respondees who indicated a general dissatisfaction with their academic preparation of voice at both the undergraduate and graduate level is of considerable concern. Perhaps this explains, at least partially, the relatively low incidence figures reported by the respondees to the questionnaire. Clinicians with inadequate preparation in an area are unlikely to seek clients from this population and may avoid them or at best assign the lowest possible priority to these cases.

In spite of the current interest in the area of voice disorders, as reflected by several new (textbook) publications, an increasing number of workshops, convention papers, etc., it is alarming that less than 50% of the school clinicians employed in Wisconsin felt to have adequate preparation to deal with voice disorders.

The medical profession, being a major referral source of voice cases, recently has become more accepting to the idea of the speech clinician's role in the diagnosis and treatment of voice disorders. It is possible, however, that this positive attitude may revert back to the old notions of scarce referrals if the clinician's preparation in this area is poor or inadequate.

Our training institutions as well as professional organizations must take a good look at their clinical and course offerings and the structure and content of opportunities in continuing education.

We are not implying that our Wisconsin data reflect the "state of the art" on a nationwide basis. However, if Wisconsin, which has several excellent training institutions in the area of speech pathology reflects inadequacy of training in the area of voice, it is not presumptuous to assume the existence of similar problems in other states.

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Some Followup Thoughts as Seen from a Bar Stool

By Fred Allota
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"Hello Fred." It must be the highlight of every kid's life to one day address his former teacher by his first name. I swiveled around on my bar stool and found myself looking at one of my mentally retarded students of 12 years ago. "Can I buy you a beer, Fred?"

Sam looked as though he had just stepped out of a high class men's clothing store. Sharply creased tan slacks were set off by a tasteful plaid sport jacket. A pipe was held jauntily between Sam's teeth. Sam had his bride of 3 weeks with him. An hour and several beers later, I found out that Sam was doing very well indeed. It was a pleasant evening.

I had often wondered what became of the youngsters I had known in my class for the educably mentally retarded. During the late 1950's there were a flurry of master's degree studies involving followup on mentally retarded students. I had similar thoughts but was a bit young in the game to have enough experience to followup on students.

From time to time however, I've chanced on a number of my former students. It has often been a warmly rewarding experience. It has also been an experience reinforcing to a notion that I've held of how different it is out there in the real world as compared to the school world.

I have a graphic memory of Steve. Steve had a head of curls and waves that many a woman envied. Once, Steve had a butch haircut and we could see he had a wavy skull. Steve was strong. He could lift three canvas gym mats at one time and carry them up three flights of stairs. For the past 12 years, Steve has been employed by a tree trimming crew.

Joe went to Vietnam. I remember him as a surly, sullen individual whom it was difficult to reach. I saw Joe shortly after his discharge. He had served honorably as a cook and was supporting a Vietnamese orphan.
I had occasion to see Joe again when the community was hit by a terrible ice storm. There was Joe serving as a volunteer cook assisting the Red Cross to feed other volunteers. Along side of Joe was another former student, making himself useful scrubbing pots and pans. Both young men are gainfully employed in local industries.

Not all of my former students are doing so well. In a recent visit to the county hospital at Christmas, I spotted Susan. My last memory of Susan was of a young girl eating crayons and smearing feces on her face. Susan looked well and we had a good conversation. Yet, to my knowledge, Susan is still a resident at the hospital.

Pete went to work on a shrimp boat out of Louisiana. Mike had a bad time of it for several years until he met a kindly lady. She had a great influence on Mike and persuaded him to return to school. He is now a foreman in a small fabricating plant. I just finished reading in the local paper where John has successfully completed an industrial course which qualifies him to do some rather special work in the plant where he works. Alice is married to a sheriff's deputy. She has three children and seems to be doing nicely.

What motivated me to put these thoughts into writing? The seeds of some inner discontent have been rattling around for sometime. A brief in the *Report on Education Research* of March 10, 1976 put the pen in my hand. It was entitled, "Mentally Retarded Disappear as Adults."

As the reader might assume, a majority of the young people cited in this article were not profoundly retarded. Perhaps, by today's standards, the designation would be questionable. Certainly, school provided a stressful situation in which students who were not able to conform in many ways were treated quite shabbily.

I wonder yet whether school can be as realistically tuned in to the "real" world as it ought to be—a world where standards for intellectual and social behavior allow for more differentness than schools seem to do. Chapter 115 has helped by forcing us to take a deeper look at young people before placing them in special programs. Laws will not, however, alter attitudes. Too, we must be alert to the possibility that even the new laws will become part of a bureaucratic system which loses its sensitivity to the human beings it was intended to serve.

The young man with the pipe is not very bright and his speech is still difficult to understand. He is doing okay and it's my pleasure to have a beer with him. Joe, John, and Mike are doing alright too and Alice is raising a fine family. I like to think I had something to do with all of this, but somehow I suspect that world out there is a great deal more accepting than the one with the ivied walls.

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